

“Self perceived working situation for immigrants and refugees working in Norway during the integration process”

Master student: Ursula-Georgine Goth

Mentor: Gunnar Bjune

Mentor: Berit Berg

June, 2003

\

Thesis submitted as a partial completion of the Master of Philosophy Degree in
International Community Health



Department of General Practice and Community Medicine

Faculty of Medicine

University of Oslo

Acknowledgements

I would like to express my appreciation to the National Hospital of Norway to give me this unique possibility and financial support that enabled me to write this thesis about the experiences gained during the intervention study.

Furthermore I would like to express my profound gratitude to my advisor and senior scientist at SINTEF, Berit Berg, whose guidance I could not do without during the work of this thesis. Not only has she been a great scholarly mentor, but also a good friend who would listen to me when I needed it most. I will forever be in her debt. I consider the University of Oslo to be lucky, to have such a fine person in their service.

My sincere appreciation goes to Gunnar Bjune for supporting me during times I was doubtful about my ability to fulfill the requirements for a Master study and his guidance to become a researcher.

I also want to thank Laurence Habib for being a good friend and giving me valuable advice for my thesis.

Finally I would like to give my appreciation to Cathrine Sæbø, head officer of HES (National Hospital of Norway) and Pål Berdahl, head of the Labor Union (National Hospital of Norway) and Janiche Peña, course leader for the language course for their feedback and opinion during the process of intervention.

Abstract

Title: Self-perceived situation for working immigrants and refugees in Norway during the integration process.

Master student: Ursula-Georgine Goth

Mentor: Gunnar Bjune

Mentor: Berit Berg

Financing: Department for Labor and Administration and the National Hospital of Norway

This study aims to recognize and describe the self-perceived working conditions for immigrants and their experiences performing blue-collar work at Rikshospitalet, the national hospital of Norway.

Reasons for this study were rumors and complaints regarding bad working conditions and poor quality of the work performed. This study was based upon interviews, observations and questionnaires as part of Action Research fieldwork over a period of 18 months.

Primarily, an interview was conducted with all the customers and leaders of the Section of Sanitation, to verify and specify the rumors.

To consider the answers in contrast to the involved co-workers, an alternate HES-survey (better described as alternate appraisal survey) was performed, which uncovered the needs of the individual co-workers. The answers were

clustered into groups depending on the co-workers' origin and the length of their ongoing work contract.

The answers given formed the basis for the introduction of new measures, such as Norwegian language classes and courses leading to the Completion of an Apprenticeship in Cleaning. Diversity management was introduced.

Co-workers with an immigrant background expressed a significantly higher need for further education (more than 88%) than their ethnic Norwegian colleagues (25%) in the first year. Cross-cultural transition and adaptation are more effectively managed when immigrants and refugees are equipped with language skills and financial resources. Despite their formal education and good performance at work the majority of non-ethnic Norwegian co-workers had an invalid or an uncertain work contract for the first years and experienced xenophobia at work.

The follow-up survey showed that the measurements met the co-workers' need. Prolongation of the Norwegian classes with a systematic preparation/training to help them cope with the stress brought about by contact with a new culture was highly appreciated. It further indicated that diversity training and leadership tutoring had to be totally enforced. One of the results of the action research was that the co-workers focused on the existence of ethnic differences between management and lower levels of the organization. The objective was not to assimilate minorities into the native organizational culture but rather to create a dominant heterogeneous culture. It was meant to be a strategy to break down barriers in the employment of minorities by producing a more diverse workforce. The aim was therefore to utilize resources from their own organization and to emphasize the importance of valuing difference.

This was linked to the existence of national groups having little communication with each other. This led to a rather tense atmosphere. After some of the

immigrant employees were promoted to management positions, a feeling of being in a threatening situation for the ethnic Norwegian management was created.

The working situation and focus on the individuals' needs changed significantly during the 18 months. This happened during a period where the budget was reduced by approx. 20% and the quality of work remained equal and even improved in some areas. The self-perceived working situation for visible immigrant co-workers improved significantly during the study. Despite the fact of the ongoing organizational changes the percentage of sick leave remained stable.

Table of contents

1. INTRODUCTION.....	1
1.1 PROBLEM DEFINITION	1
1.2 BACKGROUND INFORMATION.....	3
1.2.1 Introduction to the situation in Norway	3
1.2.2 Minorities in Norway	4
1.2.3 Naturalization	5
1.3 CENTRAL DEFINITION	6
2. THEORY, DEFINITION AND STATISTICS	9
2.1 IMMIGRATION	9
2.2 WORKING LIFE	10
2.2.1 Labor situation in Norway	10
2.2.2 Immigrants and the labor market.....	11
2.2.3 Demand for Norwegian language skills.....	12
2.3 ORGANIZATION THEORY.....	14
2.4 DIVERSITY AND DIVERSITY MANAGEMENT	16
2.4.1 Diversity.....	16
2.4.2 Diversity Management	16
2.5 CULTURE SHOCK AND CULTURE BARRIERS	18
2.6 CHANGE THEORY - ACCULTURATION.....	22
3. METHOD AND THE PROBLEM OF INTEGRATION	24
3.1 CHOICE OF METHOD (DEFINITION, REASONING, OWN ROLE)	24
3.1.1 Introduction.....	24
3.1.2 Rationale of the study.....	25
3.1.3 Overall research objective	26
3.1.4 Specific objectives.....	26
3.1.5 Design and Method	26
3.2 ACTION RESEARCH	30
3.2.1 Description.....	30
3.2.2 From integration project to action research.....	33
3.2.3 Overview of the various phases of the research project.....	34
3.3 SURVEY AND QUANTITATIVE MATERIALS	35
3.3.1 Structured interview and the follow up one year later	35
4. EMPIRICAL MATERIAL/PRESENTATION OF THE STUDY.....	39
4.1 THE NATIONAL HOSPITAL OF NORWAY (NHN) - RIKSHOSPITALET	39
4.1.1. General information about the NHN (34)	39
4.1.2 Division for Internal Service / Intern Service (ISE)	42
4.1.3 Section of Sanitation	42
4.2 PROJECTS	43
4.2.1 Sanitation sections in Norway.....	43
4.2.2 The co-worker survey as an alternative appraisal interview	45
4.2.3 The Norwegian Language Course.....	46
4.2.4 Course and training-program to obtain the "Certificate of Completed Apprenticeship in Cleaning"	52
4.2.5 Diversity management.....	57
4.2.6 Temporary staff desk - Vikarpool.....	60
4.2.7 Projects in progress	60
4.3 CHRONOLOGICAL SURVEY / APPRAISAL HES SURVEY.....	62
4.4 DISCUSSION AND ANALYSIS OF INDIVIDUAL FINDINGS	73
4.4.1 Discussion and analysis of findings from the Language Course.....	73
4.4.2 Discussion and Analysis of findings from the structured interview	77
5. SUMMARY	80
5.1. DISCUSSION OF FINDINGS.....	80
5.1.1 Language training and vocational training (apprenticeship)	80

5.1.2 Experienced reaction patterns of the majority population.....	81
5.1.3 Culture training.....	81
5.1.4 Diversity Training.....	81
5.1.5 Organizational equal opportunity policies.....	81
5.2 HOW THESE RESULTS MAY BE USED	83
5.3 CONCLUDING COMMENTS AND SUGGESTIONS	85
6. LIST OF REFERENCES	87
APPENDICES	90

List of tables

Table 3.1 Overview of the various phases of the research project (time frame)	34
Table 4.1: Need for further education, answers from 2001	63
Table 4.2: Need for further education, answers from 2002	65
Table 4.3: Welfare at work, answers from 2001	67
Table 4.4: Welfare at work, answers from 2002	69
Table 4.5: Plans for the future, answers from 2001	72
Table 4.6: Plans for the future, answers from 2002	72

List of Abbreviations incl. Translation

HES	Health, Environment and Safety	Helse, Miljø og Sikkerhet (HMS)
NHN	The National Hospital of Norway	Rikshospitalet
PACRD	Plan of Action contra Racism and Discrimination (Norway 2000)	
SINTEF	Name of largest independent research organization in Scandinavia	
UDI	The Directorate of Immigration	Utlendingsdirektoratet

1. INTRODUCTION

1.1 Problem Definition

Many people immigrate to Norway hoping to find a better life and a refuge from places and times of uncertainty. Immigration to Norway is the result of a number of contributing factors, for example the fact that emigration is sometimes seen to be the answer to insecurity, social and economic problems (the effects of war, instability, encouragement of emigration and advertised opportunity) and the fact that the “new country” promises security, housing and jobs. To what extent the descriptions of this supposedly wonderful journey are accurate, does not generally come out until the move is well under way.

Inhabitants of foreign countries are often made aware of Norway and all it supposedly has to offer through relatives or friends who are already living in Norway. Information given is not always as accurate as it should be, and this continues to be a problem presently. Views on the previous settlement in Norway differ according to the person and his or her experiences, and their interpretations of particular situations. Descriptions of Norway and all it has to offer have the tendency to enhance the positive aspects while trying to hide or lessen the negative ones; nonetheless immigration to and settlement in Norway did and does not go without struggle or barriers to overcome. Population diversity due to ethnic and cultural differences was a very prevalent issue in the development and growth of Norway, and has often led to friction between different groups of people.

This paper will specifically focus on a group of workers, namely the staff of the Section of Sanitation at The National Hospital of Norway (NHN). As of July 2002, the Section of Sanitation employs over 150 co-workers, of which more than 85% have an immigrant background.

During action research in this department the Norwegian language, which is a key component of ethnicity, was identified as one of the barriers an immigrant co-worker is confronted with on an everyday basis.

The overall problem definition was therefore phrased as:

“Opportunities and obstacles for immigrants and refugees in labor during the integration process in Norway”

Overall question:

To which extent have public authorities and/or work organization strategies responded to the different needs immigrants and refugees expose in order to help them to integrate into the Norwegian society and working life.

An extended literature search was performed in order to cover the different topics of relevance for the study.

Literature mentioned in this study will cover various topics concerning obstacles for working refugees or immigrants. The literature chosen is based both on qualitative or quantitative data.

The literature provides material specifically related to the following topics:

- Immigration to Norway (qualitative data)
- Norwegian legislation concerning racism and discrimination
- The main barrier to the labor market – the Norwegian language
- Immigration and integration in general
- Culture shock and Cultural barriers
- Challenges in changing situations
- Working life and diversity management
- Organization theory and acculturation theories (change theory)

1.2 Background information

1.2.1 Introduction to the situation in Norway

Norway has historically been isolated by its geography. Immigration as we understand it today, is therefore a rather recent phenomenon in Norway.

Conformity is a strong feature of the Norwegian society. (1) (2)

During the 50's and 60's, immigrants to Norway came from other Nordic countries, especially from Denmark and Sweden. Immigration as Norway considers it today, meaning the "non-European immigration", really started in 1968 where 20,000 guest workers from Pakistan were admitted to the country, followed by refugees from South America. After a liberal period, restrictions on labor immigration into Norway were introduced in 1975.

Norway's integration policy has many common features with other Western European countries: as in France, naturalization is quite easy to obtain; as in Germany, the refugee policy is generous; and similarly to Denmark, Norway is developing a multicultural policy. Still, the Norwegian policy as regards immigration provokes much debate. Some say it is too strict, others too lenient. Norway has a multicultural immigrant and minority policy set up in the 70's, whereby residents are given a freedom of choice between preserving their old culture and adopting the Norwegian one.

During the last 20 years Norway has evolved into a multicultural society. In 1980 there were slightly more than 95,000 inhabitants with immigrant backgrounds (from Western and Third World countries) in Norway. In January 2002 the number of persons with immigrant background had risen to almost 310,700. This represents more than a tripling of the immigrant population from 1980 to 2002, which represents now 6.9% of the total population in Norway.

The refugee policy is generous, compared with many industrial countries, despite recent changes that have made it more restrictive. After Austria, Norway has had the biggest influx of asylum claimants in Europe in absolute terms, and relative to its population the biggest of all during the 1980's. (3) (4) (5)

The policy is equally generous for refugees' dependants. Not only Norway accepted a high UNHCR European quota (1,250 refugees annually), but also "grants residence permits for refugees in categories beyond those defined by the Geneva Convention".

In 1999 alone, the immigrant population increased by 22,000 persons (6) and immigrants accounted for 85% of the total population growth. (7)

Immigration figures do not lend themselves easily to a comparison between countries, but it seems that the level of immigration to Norway is more than half that of Sweden and the Netherlands. The immigrants in Norway constitute a rather young population, with few old persons. There are, however, big differences according to region and country of origin. (7)

1.2.2 Minorities in Norway

The best-known minorities in Norway are the Sami and Finnish-speaking groups in the North of the country. Gypsies and subgroups like the Taters have lived in the Norwegian society for hundreds of years. Since the Middle Ages, a considerable immigration from Denmark, Sweden, Finnmark and Germany has been ongoing.

Still, the issue of ethnic minorities has been on the agenda in the Norwegian media and in the Norwegian society for the last 15-20 years. The conflicting and involving issues are due to the immigration from non-European countries. As mentioned earlier, there were almost no visible immigrants in Norway (immigrants from outside Europe) before the 1960's. As outlined above, the first

non-European group of immigrants came in the late 60's and early 70's from Pakistan. Initially, they came on a short-term working residency. Most of them came from a limited area, an area near Lahore (the Pakistani part of Punjab). The years after 1973, political refugees arrived from Chile (Pinochet's change of government) and around 1979 from Iran after the fall of the monarchy and the new leadership of Khomeini.

Norway imposed in 1975 a law restricting immigration. This was a result of rising unemployment rate and a low economic conjuncture in the country. Since this law was ratified, immigration has been subject to family reunification and political asylum, and not to work-immigration.

Since 1975 these groups have consisted mostly from refugees from the civil war in Vietnam, Sri Lanka, Turkish Kurdistan, Somalia, former Yugoslavia and Kosovo. Refugees are generally better educated than immigrants who come to seek work.

It is registered by Statistics Norway (SSB) that the percentage of people with a foreign background from Asia, Africa, Turkey and South America and Central America has risen from 0.1% of the immigrant population in 1970 to 5.29% in 2002. (3)

1.2.3 Naturalization

Naturalization rates are high in Norway, and more than 50% of foreign-born residents have Norwegian citizenship. Naturalization may be obtained after five or seven years of residence, depending of the citizenship of origin (two years for Nordic citizens), and foreign residents can vote in local elections after three years of residence. Intermarriages are frequent, and half of the women with a foreign background have a Norwegian spouse.

As mentioned earlier, in daily life, immigrants can choose between preserving their old culture and adopting the Norwegian one. Subsidies are directed towards immigrant associations and churches, press and cultural activities. Mother-tongue instruction is offered in school for up to two hours per week. The central state grants funds for libraries to buy books and newspapers in foreign languages, and the national radio service transmits programs in some foreign languages (e.g. Urdu, Spanish,...in addition to Sami)

The White Paper no.17 (*Stortingsmelding 17* in Norwegian) (4) to the Norwegian Parliament finds that there is racism and discrimination in Norway, and that such phenomena must be prevented, contained and addressed through specific measures in a number of policy areas. The report states that developments must be monitored and that a systematic national approach is required. Underlying this is the wish to gain more reliable knowledge of the nature of the racism and discrimination that society is facing, and the scope of these problems. This report also acknowledges that racism and discrimination are genuine problems at a national level. (6)

This study is therefore developed considering both the actual situation in Norway concerning discriminations, and the NHN guidelines on management principles (8) and is meant to contribute to a problem-solving strategy on a national basis. The information presented in this study aims to provide more substantial information for both national and international reports.

1.3 Central Definition

Plan of Action to Combat Racism and Discrimination (PACRD) – labor market

The immigrant population has increased from 3% to 6.6% during the last 15 years. A new population structure requires adjustments to the government

policies so that the needs of all the various groups are addressed in the best possible way.

Immigrants and minorities frequently suffer discrimination in the labor market, and their children experience difficulties at school. Both factors make the labor market integration of immigrants/minorities a quite uncertain process.

Immigrants and minorities are over-represented in unskilled jobs, and among the unemployed. To face this problem, specific vocational training programs and policies against labor market discrimination have been implemented.

The “plan of action” applies to the indigenous people, national minorities and the immigrant population of Norway.

In 1998, the Government published the “Plan of Action to Combat Racism and Discrimination” (1998-2001) (9). This plan was a direct follow-up of the report to the Norwegian Parliament no. 17 (1996-1997) (4), launching a number of measures within the state’s areas of responsibility to improve the monitoring of developments.

The PACRD indicates that the following groups are subject to racism and discrimination: immigrant population, national minorities and the Sami people. The measures set out in the “plan of Action” are mainly focused on: working life, public service, schools/education, police/prosecuting authorities/courts, documentation/monitoring and the local community.

The measures in this plan of action are mainly targeted directly towards combating racism and discrimination. Measures to promote integration in general are therefore not included, as they have a different focus and often a different target group. Measures in this plan of action are primarily oriented towards the majority population. (9)

Application of the PACRD in the study

During the entire study, I was focusing on adapting the measurements of working life as outlined in the PACRD.

The Government has invited the social partners, both non-governmental organizations working in this field and institutions with expertise in this field to take part in a forum for ethnic diversity in working life. This forum also includes representatives from the responsible government ministries. The Government has also formulated non-discrimination requirements for suppliers to the central government.

The purpose of the forum was to follow up and continue to develop diversity in the labor market as well as to exchange experience and develop knowledge. The information supplied by this study will contribute to the information demanded by the Government.

During the 18-month fieldwork period, a number of measures were also implemented to counteract exclusion on the basis of ethnic origin. Two main measurements were introduced, namely language training during working hours and diversity management.

2. THEORY, DEFINITION AND STATISTICS

2.1 Immigration

Definition:

Immigration (*noun*) -

1. migration into a place (especially migration to a country of which you are not a native in order to settle there)

Synonyms: in-migration

2. the body of immigrants arriving during a specified interval

"the increased immigration strengthened the labor force ..."

When talking about immigrants, negative aspects are often mentioned first. Unemployment, low educational standards, integration problems and language problems are usually the first things that are mentioned in conversation. The focus is almost never on the formal or informal competences that the immigrants bring with them. Furthermore it is important to recall that the immigrant population is much less homogeneous than the ethnic Scandinavian population.

It is important to both understand and have the knowledge of the immigrants' situation in Norway. The lack of this knowledge can lead to false presumptions and undetected options concerning the Government's integration strategy.

As shown in the literature and in real life, there are different ways to define an "immigrant". In order to avoid misunderstandings, central conceptions used in this paper are defined with the same context that was used in Statistics Norway (SSB), Immigration and immigrants 2002 from B. Lie (page 12). (3)

Immigration category refers to various elements that delimitate a person as an immigrant. “Persons without immigrant background” is a group besides the category of “persons with an immigrant background.”

Visible immigrants, as used in this paper, are persons of a different appearance than the majority population in Norway for example with regards to skin color, clothing or face structure.

First-generation immigrants are persons born abroad of two foreign-born parents. First-generation immigrants immigrated to Norway at some point.

Persons with an immigrant background cover a larger group than the immigrant population. The following divisions are used for persons with a background from immigration:

- first-generation immigrants
- persons born in Norway of two foreign-born parents
- persons adopted from abroad
- persons with only one Norwegian-born parent

2.2 Working life

2.2.1 Labor situation in Norway

Through political and social processes the labor market has become a central arena for enforcing political goals in Norway. Working life and the labor market are at the core of the machinery distributing tasks and rewards to employers and employees. Norwegian legislation on gender equality bans discrimination at work. The Act on Working Environment states that employers are responsible for providing a working environment that protects employees from threats to their physical and mental health. Working conditions should not cause differences in health outcome or impairment of health. Work is an important factor to the individuals’ self-esteem also from a mental health point of view.

Good mental health is crucial both in a work setting and in the integration process.

Working life is also an important arena where role modeling takes place. At the work place they are met with norms and expectations embedded in their work role. Equality may be achieved through changes in work roles.

Each year Statistics Norway (*Statistisk sentralbyrå/SSB*) measures people's attitudes toward immigrants and the current immigration policy by asking a representative sample of the population (gross sample of 1987 persons/70% answered) to take a standpoint on four statements. The statement relevant to this topic is: should immigrants have the same opportunity as Norwegians to work? In the year 2001, more than 90 % believed that immigrants should have the same opportunity to work. (10)

2.2.2 Immigrants and the labor market

Figures from SSB's study Immigration and immigrants 2002 (3) show that immigrants constituted 6.6% of the total Norwegian population in 2001, and that half of these were people from the 'non-Western' part of the world. The figures confirm that there is a clear over-representation in two branches of the world of work, namely "Hotels and restaurants" and "Industrial cleaning". These labor-intensive branches employ to a large extent unskilled labor. Non-Western immigrants (from Africa, South and Central America and Asia) make up a large proportion of immigrants in those branches. (3) pp. 69-70

As mentioned earlier, the immigrant population represented 6.6% of the population at the beginning of 2001. Figures from 2000 show that the employment rate among non-Western immigrants varies with 42% to 54%, although there are significant variations depending on the time spent living in Norway. These figures compare with the overall figure of approximately 60% for the population at large. Likewise, the unemployment rate among non-

Western immigrants was significantly higher than among indigenous workers in 2000, ranging from 8% for immigrants of South American origin to approximately 14% for those of African origin, which may be contrasted with the 3.4% rate for the whole population.

A large proportion of immigrants in Norway live and work in the capital, Oslo. Recent figures from the Labor Market Administration of Norway ([Aetat](#)), show that although non-Western immigrants make up only 9.3% of the population of Oslo, they constitute 36.2% of all unemployed persons there. Furthermore, the figures show that 70% of the participants in the initiatives intended to boost the labor market in Oslo, are of non-Western origin, and that one of the principal explanations for this trend is a general reluctance among employers to recruit people from such groups (3)(5).

Not only is the situation of non-Western immigrants in the Norwegian labor market characterized by lower employment activity, but their employment activity is also very much confined to particular sectors of the labor market, such as cleaning and renovation, hotels and restaurants, and the transport sector.

These are areas characterized by low education levels and few requirements with regards to formal qualifications. Furthermore, another characteristic of the immigrant situation is that they are subject to vulnerable employment conditions more often than indigenous workers. For instance, 1997 figures from SSB show that a much larger than average share of immigrants are subject to temporary employment - 20% compared with 8.6% for the population at large.

2.2.3 Demand for Norwegian language skills

As discussed in several sources, language is the biggest obstacle during the integration process (5)(12)

During this study, NHN offered free Norwegian language courses to everyone employed at the hospital (an initiative that was made possible through funding from the Department for Work and Administration).

In a study performed by the Norwegian Directorate of Immigration (*Utlendingsdirektoratet/UDI* in Norwegian) (6) on formal barriers to immigrants in the labor market, showed that more than 80% of municipalities in Norway demanded high Norwegian language skills. Very high demands are made for Norwegian language skills in most jobs, even for cleaning personnel.

Problems experienced are often the result of cultural misunderstandings and stereotypes. Language is also necessary to immigrants when they need to convince the major population of their real qualifications obtained outside Norway. (11) (12)

Aetat (Labor Market Administration of Norway) demand that refugees and immigrants must have passed the IFF (*introduksjonsprogram for fremmedspråklige* – introduction program for non-native speakers) language test or a similar language test before they are even willing to register them as job seekers. 30% of the responding municipalities also find that language is used as an excuse for not employing immigrants, or that the language skills demanded for a particular job exceed what is necessary. The report also reveals that many local authorities believe that employers use language skills in an attempt to hide their negative attitudes to immigrants.

Further it is mentioned in the report that employers in both the public and the private sector discriminate. However the public sector discriminate most.

Xenophobia in addition to skepticism may explain why discrimination is practiced. It is also claimed that public sector employers lack both the strategy and the will to employ immigrants.

Immigrants and refugees from non-European countries are most frequently subjected to discrimination and the following characteristics describe those who have the greatest problems in the labor market: (6)

- poor Norwegian language skills
- dark skin
- persons from Africa, Asia or South America
- Muslims or assumed Muslims

2.3 Organization Theory

The British philosopher MacIntyre's theories in organization research show interesting connections to the study of this thesis. His fundamental criticism is based on the use of traditional methodology in social science when applied to organization and management.

MacIntyre acknowledges that natural science is based on causal connection but he also suggests that such a basis is not appropriate in the case of the social sciences.

On the contrary social science is able to identify regularities (correlations) but is not able to predict and explain as well as natural science. MacIntyre contends that if methods used in social science try to predict, the result will construct illusions and underline power interests in order to achieve a distinct target. (13)(14)

MacIntyre alleges that a bureaucratic organization will arise. This form of organization will maximize the possibility to predict and control actions of the individual. The bureaucratization will inhibit that the organization is effective and successful. To be able to predict actions the organization is forced to practice a form for totalitarianism, rigidism, and control that is counteracting success. Organization efficiency and predictability are not combinable.

The governmental sector is today exposed to reorganization under ongoing turbulences, changing framework and alteration processes.

It is therefore important to identify the factors, which obstruct or promote constructive processes. MacIntyre is supporting his theory on Tom Burns' conclusions on organizational behavior. (15)

The conditions in an organization that are important for the modification competence are: innovative adaptation, individual initiative, a flexible response to changing needs or skills, decentralized decisions and problem solutions, a continued redefining of individual tasks, communication and advice rather than instructions and decisions. (14) page 106

Human relation theory has tried to integrate individual and psychological factors into the different levels of organizations. Among various behavioral theories the most embraced ones are those of Fredrick Herzberg and Abraham Maslow. Herzberg, a psychologist, proposed a theory about job factors that motivate employees. These theories are widely cited in the business literature.

Herzberg (16) constructed a two-dimensional paradigm of factors affecting people's attitudes about work. He concluded that such factors as company policy, supervision, interpersonal relations, working conditions, and salary are "hygiene factors" (rather than motivators). According to the theory, the absence of hygiene factors can create job dissatisfaction, but their presence does not motivate or create satisfaction.

In contrast, he determined from the data that the motivators were elements that enriched a person's job. He found five factors in particular that were strong determiners of job satisfaction: achievements, recognition, work itself, responsibility and advancement. These motivators or satisfiers were associated with long-term positive effects in job performance while the hygiene

factors/dissatisfies consistently produced only short-term changes in job attitudes and performance, which quickly fell back to its previous level. (16)

2.4 Diversity and Diversity Management

2.4.1 Diversity

Diversity in an organization can both act as a motivating force or a source of a conflict. Motivation, because of the competition it inspires, and conflict, because of the friction that may be caused between people of diverse backgrounds. There are a number of demographic characteristics contributing to diversity. The most widely recognized are: race, religion, gender, education, age and social norms. In this study only race, religion and education will be discussed demographic characteristics.

The British philosopher MacIntyre's philosophy, and the organization research for this study show interesting connections. His fundamental critic is based on the use of traditional based methodology in social science when applied in organizations and management. (13)(14)

2.4.2 Diversity Management

Diversity management is one of the latest developments in a sequence of strategies in the working world in general. Diversity management aims to get excluded minorities better represented in employment. It seems that in the USA a diversity management policy is a relatively normal and uncontroversial business practice, at least for the bigger corporations. In recent years the practice has started to attract attention in Europe. Evidence on the European spread of diversity practices comes from a 2001 study on "Mainstreaming Cultural Diversity", initiated and funded by the European Monitoring Centre on Racism and Xenophobia (EUMC) and conducted by the Berlin Institute for Comparative Research. There now exists an enormous body of literature related to diversity

management and related topics, and in recent years a body of critical literature on diversity management has also developed. (11)

The development in the US from 1961 to 1996 is described by K. Erin and F. Dobbins study, which was published in April 1998. (17) The study describes how corporative affirmative action programs became diversity programs.

During the 1970s, active federal enforcement of equal employment opportunity and affirmative action law, coupled with ambiguity about the terms of compliance, stimulated employers to hire anti-discrimination specialists to fashion equal employment opportunity and anti-discrimination programs.

In the early 1980s the Reagan administration curtailed enforcement, but as Philip Selznick's band of early institutionalists might have predicted, equal employment opportunity and anti-discrimination program practices had developed an organizational constituency in specialists in those programs and thus survived Reagan's enforcement cutbacks. As John Meyer's band of neoinstitutionalists might have predicted, that constituency collectively retheorized anti-discrimination practices through professional returns in terms of efficiency, using the rhetoric of diversity management. (17)

Threats and challenges during the period of changes in the organizational structure (alteration theory/ Paul Watzlawick)

The end of the 20th Century and the move to the 21st Century is marked by three fundamental changes:

1. Technical progress, and especially in information technology.
2. Disputing society and the established order shows man's liberation. In order to succeed to become even more efficient, organizations must take

the risk to “free” the individuals, and thus become aware of their personal sovereignty, their freedom and their right to self-determination.

3. This transformation releases not only a significant innovative and creative potential but also a permanent critical process that will question authority, rules, etc. and even challenge them.

Change also becomes the fertilizer of innovation, constant creation, and its nourishing substrate. Adaptive and innovative organization will develop owing to the command of the changes brought about by economical and technological progress.

P. Watzlawick, an American professor of psychiatry, and his two colleagues (a psychologist and a psychiatrist) described in the book *Change* 74 different phenomena in alteration. The basic principles are based on experiences with individual clients or pairs. In his opinion the theory of alteration is applicable in most situations despite the fact of size or social context. (18)

P. Watzlawick who co-founded the Palo Alto group and wrote a methodology of change describes change as: Whatever change we try to make, we might continue a “game without end”. This without going anywhere and it is usually a change on the process level, which brings about what we desire to achieve; a change we want to achieve.

2.5 Culture Shock and Culture Barriers

The mental health research of Anne Paludan (1974) was performed on the “New Refugees” in the USA. Until the 1960s resettlement was focused on the traditional refugees, Europeans, primarily eastern Europeans, who were products of the Cold War. Now the weight of concern and interest is shifting to the new refugees from Africa, Asia, and Latin America. The new element is not the presence of refugees in those regions. It is the great increase in their numbers

and the fact that they are no longer solely dealt with within those regions but in Europe and North America.

The key differences between the traditional and new refugees are that the new refugees are culturally, racially and ethnically vastly different from their hosts, they come from “less-developed” countries (countries that are at a greatly different stage of development from that of the host country), and they are likely to lack kin, potential support groups, in their country of resettlement. Traditional refugees, on the contrary, are culturally and ethnically similar to their host, come from societies whose levels of development are similar, and are likely to have welcomed and assisted by well-established kinfolk who know their language and can cushion their adjustment. Many of the refugees have levels of skills and education that produced prominence or success in their less developed homelands but which will not transfer well to an urban technological society.

The patterns of adjustment and resettlement behavior described below are applicable to the new refugees and immigrants but in many cases the stresses and problems are greatly magnified.

In examining the refugee experience during resettlement, it is important to take a split-screen view of what is happening. One side is what research indicates happens to most refugees, what they should actually expect regarding life in a new and strange land. On the other side we have the refugees’ expectations, often romantic and unrealistic, which are quite different from what we think they should expect. The refugees’ expectations will have a large impact on their behavior during resettlement.

The general pattern of refugee adjustment over time can be analyzed in four stages: 1) the initial arrival period of the first few months; 2) the first and second years; 3) after four to five years; 4) a decade or more later. This discussion is limited to just a few key points. Across the spectrum of occupational and

economic adjustment, social adjustment, cultural adjustment and mental health, the patterns develop as follows.

After all the trauma and suffering, after the refugee camp, a refugee approaches the new land with mixed feelings. The refugee left home to escape danger; there was no destination in mind, no "positive original motivation to settle elsewhere" (19). The country of resettlement is often chosen against or despite his wishes; the refugee is taking a "plunge" into the unknown.

On his way to the country offering him asylum, the refugee experienced ...his liberation from the troubles and cares which has driven him from his fatherland; the oppression of the uncertain arrival, which he was to face; the sorrow on account of all that was dear to him and left behind. Against the background of his/her experiences he/she fostered undifferentiated and rosy-colored expectations about things awaiting him in the country lying ahead (19).

Refugees have high expectations about their new life, especially regarding their economic and occupational adjustment. They do not expect to lose anything because of their migration. The refugees want to recover their lost status and are resistant to accepting jobs that represent underemployment.

A phenomenon of particular importance regarding refugee behavior during resettlement is the refugees' strong belief that others owe them something. Since their persecutors are unavailable, the refugees shift their demands to the government and the helping agencies (19).

Refugees often have difficulties with agencies set up to help them. Many agencies report that the refugees studied tended to be very demanding, displaying an attitude that they should be compensated for their unjust suffering and fortitude. They continually complained of not receiving enough (20).

Neither the government nor the agencies are able to satisfy all of the refugees' demands. When their requests are turned down the refugees become suspicious and bitter. Denied what they believe is owed to them, feeling that the agencies seek to control them, the refugees suspect "counterfeit-nurturance", that is, aid that is given to humiliate and subjugate them rather than aid motivated by genuine charity. (21)

A vicious spiral can set in: refugees are helped because they are helpless; they must display their need and helplessness; the caseworker cannot accede to all who are needy and must shield himself from emotional involvement; the cool attitude of the caseworker conveys suspicion to the refugee about his truthfulness; if they won't believe the truth the refugee inflates it; hearing exaggerated stories the caseworker becomes suspicious (21).

The immigrant tends to see the resettlement agency as a hostile bureaucracy. This may cause the immigrant to become aggressive, demanding of resources and to measure his initial success in the USA by how much he can get from the agency (22).

A last point regarding refugee resettlement behavior: the refugee is searching his way through a strange and frightening society. The patterns of behavior that sustained life at home are no longer sufficient. The refugee is uncertain about how to mobilize his resources to succeed in his new home.

Loss of patterns of conduct is intensified by the uncertainty of what kind of behavior is acceptable or no acceptable in their new environment...(they) may exhibit restlessness, aimless bustling about, constantly searching for something to do (22).

Without clear guidance from the host the refugee does not know what to do. This need for guidance is greatest in the initial stages of resettlement.

(He)...is experiencing crisis and is often placed in ambiguous situations without clear definitions of behavioral expectations... tries to redefine his life situation and to adopt strategies for dealing with the crisis; he begins to discover that their prior life experiences have not adequately prepared him for a life in this different culture (22).

The last cluster, culture shock, (23), really encompasses all the others to a degree. Its main elements are the test it puts to the refugees personality and stability when he is placed in a strange and unpredictable environment; the lost culture-desocialization and resocialization; lost friends, family, food, values; the loss of all that is familiar may represent a threat to one's identity, and can lead to the mourning, grief, despair and nostalgia the refugee feels for his gigantic loss. Culture shock will particularly affect those refugees who did not think about, intend, or prepare for exodus, which was caught up in panic, hysteria, or even adventure. (24)

2.6 Change Theory - acculturation

The theory describes potential forces for persistence as social/cultural pressure, attachment to self, and attachment to views of self and other as well as the fear of change or loss.

Forces for change increase the potential for change and is increasing the level of psychopathology (especially personality disorder) increases the possibility that these factors will persist rather than change.

Other potential forces for change are environmental/cultural change, psychological pain and the existing choice. (18)

Also in studies (25) not related to Change Theory we can find the documentation that post emigration experiences affect mental health outcomes. The degree of current stress, stress created by acculturative tasks such as

learning a new language, seeking employment, rebuilding social support and redefining roles was the strongest overall pre-and post-emigration predictor of mental health.

Collectivism-individualism of the original culture in family and childrearing, (e.g. Latinos are more collective) so different acculturation process that involves adding the skills, cultural values and behaviors of their new host country to their repertoire rather than substitute; acculturation therefore can improve relations with the dominant group. Generations with different levels of acculturation will disagree over child rearing issues. Eldering and Knorth found in 1998 in a study (26) about family structure, that cultural competence is a main factor that affects the acculturation structure. Immigrant families appear to be in a state of disharmony upon their arrival in the new country, as family members have to accommodate to each other again.

Immigrant families with a traditional role pattern are less competent in guiding their children in the acculturation process after immigration than are egalitarian families, leading to the marginalization of the children.

3. METHOD AND THE PROBLEM OF INTEGRATION

3.1 Choice of method (definition, reasoning, own role)

3.1.1 Introduction

After working for the last ten years in multicultural environments and working consciously with a diversity approach, working with the PACRD and enforcing diversity management was seen as a challenge. In the case of this study where over 85% of the work force had a foreign background but no visible foreigner was in a permanent leading position, organizational changes made it possible to lift both their formal and their informal competence. Targeting changes, adaptation and enforcing formal education (Certificate of Completed Apprenticeship) helped the individual co-worker to compete later in life.

The research process for this study can be described as slightly untraditional, at least with regards to the starting phases of the research. The basic elements for the study were gathered from initial observations that had been done not within the frame of a research project but within the realm of my daily work duties as a manager. This situation as an “insider” provided me with a unique opportunity to gather preliminary data and sketch the preliminary research questions. From then on, the research was performed in a more traditional way, with a first emphasis on reviewing literature and choosing the method, then a focus on carrying out the fieldwork in a systematic manner.

I am a first generation immigrant to Norway myself and was working during this period as the head of the department with up to 170 co-workers most of whom had a multi-cultural background. The majority of those co-workers are first generation immigrants or refugees with a high education from their home country compared with the native co-workers (native Norwegians) who had no or little formal education.

3.1.2 Rationale of the study

During the last 20 years, Norway has evolved into a multicultural society. In 1980 there were slightly more than 95,000 persons with an immigrant background in Norway (both from Western countries and from developing countries). In January 2000 the number of persons with an immigrant background had risen to almost 285,400. This represents a tripling of the immigrant population from 1980 to 2001. (3)

Many newly arrived immigrants need guidance and support to find their place in the Norwegian society. They need language instruction (Norwegian) and information about the Norwegian culture in order to complete the qualification procedures, to find employment or acquire education.

The new introductory program aims to help them achieve this.

The background of each immigrant is plotted, and the local authorities draw up a plan for further follow-up in close collaboration with the newly arrived immigrant.

This master thesis is meant to be a contribution to the knowledge about the new introduction program and the general need for guidance and assistance to newly arrived immigrants.

The purpose is to provide more substantial information for both national and international actors.

In order to identify the problem during the period of 1.5 years of fieldwork, a number of measures were also implemented to counteract exclusion on the basis of ethnic origin. Three main measurements, confirmed by the survey findings were introduced; language training during working hours, offer to get a “certificate of completed apprenticeship” (‘fagbrev’ in Norwegian) and diversity management.

3.1.3 Overall research objective

Central goals within the joint political platform include:

Understanding the self-perceived situation for immigrants and refugees working in low paid jobs (and low status) in their environment in Norway by focusing on

1. Norwegian language skills among immigrants
2. Diversity management

In this study those two major political goals are the basis of the research question.

The aim of the study is to collect and analyze information in order to understand the self-perceived situation of visible immigrants in active labor during their integration process.

3.1.4 Specific objectives

- To understand the situation, experiences and thoughts from the immigrants' point of view
- To identify risk factors and obstacles in their working situation
- To identify the strategy of mastering their daily life (cognitive evaluation)
- To analyze/illustrate the experienced reaction patterns of the majority population

3.1 5 Design and Method

This section gives a general overview of possible methods, the chosen design and methods, as well as how the survey was implemented.

Qualitative vs. Quantitative Research

In general Qualitative Research can be described as a:

- Research that does not use numbers in its analysis

- Data is usually in the form of words that have been recorded to represent observations
- Observations are usually made in the real world, as phenomena really happen
- Methods include participant observation, historical comparative and some form of content analysis. (27)

This study is an inquiry conducted from a qualitative perspective on the nature of the integration process.

The advantages of qualitative research are:

- Greater validity/less artificiality observing phenomena in natural/real life settings by allowing researchers to develop a more accurate understanding of those phenomena.
- Depth of understanding may be greatest with qualitative research, not superficial richness constructivism and second-order cybernetics (18)

The disadvantages of qualitative research are:

- Subjectivity
- Difficult reproducibility
- Poor reliability (two researchers may arrive at different conclusions based on their observations of the same phenomenon at the same time)
- Relatively difficult, labor intensive, expensive and time consuming
- Does not always get the respect it deserves
- Difficult to generalize

Quantitative research is described as objective, highly reliable, not time consuming and relatively easy to conduct. In the case of this study, it was necessary to gather detailed information. Therefore the use of numerical measurement, the most common form of research, was unsuitable. Specifically, important details could not be easily observed and counted.

In the case of a follow-up study, where detailed information is provided by this study, a verification study will be performed in the form of qualitative research.

Choice of method for the study

This qualitative research involves a variety of empirical materials – case study, personal experience, and interviews – the described routine and problematic moments and meanings in individual lives.

Many researchers might refrain from conducting qualitative research, because traditional quantitative methods typically yield statistical data.

Although useful, statistics provide little information about the subjectively experienced problems immigrants are facing. The challenge for the researcher is to find research methods that fit with their clinical theories and their goals as immediately relevant to the ongoing process.

Research methods chosen

In this situation a combination of interview surveys, participant observations, in-depth interviews and the use of a diary during this period was considered to be the most suitable method for the study.

The response from the section's customers gave clear indication that there was a need for precise and generalizable information as well as a need to test stereotyped opinions in a qualitative manner.

The initial survey and the follow-up survey were performed under natural settings, attempting to make sense of, or interpret phenomena in terms of the meanings people give to them.

One of the methods chosen, the survey, had to be adapted in order to give an in-depth examination of the phenomena, use subjective information, not be limited to rigidly definable variables, examine complex questions, deal with value-laden

questions, explore new areas of research and give an opportunity to build new theories.

It was decided that this survey would be a part of an intervention study, performed with qualitative methods as action research. The reason for this choice will be described as follows.

This research aimed at a holistic approach and triangulation, the application and combination of several research methodologies. The data collected had to be detailed. Therefore a group of co-workers from the section were invited to an in-depth examination in a chosen setting. Multiple data sources had to be combined. The focus was on the individual in the group (one section at the hospital) but not on the population (all the co-workers at the hospital). Meaning was extracted from the observations and the findings should be instructive and to some extent generalizable to other similar employment situations.

Ethnography used in the study will be external observation (by the Deputy Head of Safety and the head of the Labor Union (respectively *Hovedverneombud* and *Leder i fagforeningen* in Norwegian), passive observation by the Norwegian teacher, participant observation (short-term and long-term) by the project manager and balanced passive observation from the survey interviewer.

Units of Analysis

Data for analysis for the study came from individuals and from organizations (the Labor Union and the Deputy Head of Safety). The individual-based survey, observations registered in the diary as well as interviews with individuals, were all used as the basis of the analysis.

One should be aware of the Ecological Fallacy critic when drawing conclusions about individuals, individual behavior based on the data collected and analyzed at the group or organizational level.

Research methods rejected

As mentioned earlier, quantitative methods were not considered suitable for the purpose of this study.

In the case of cross-sectional studies, the rejection was based on the disadvantage of not being able to identify change over time and to identify causal relations.

Longitudinal Designs (Cohort studies, Trend studies, Panel Longitudinal studies) describe changes over time and identify causes of social phenomena. Due to the following three reasons this method was rejected. First, there was a risk with a panel study that subjects would drop out for a variety of reasons (see ethical dilemma). Second, using this method would incur a relatively great expense. Third, this method is generally very time-consuming.

3.2 Action Research

3.2.1 Description

Action research is acknowledged worldwide as a powerful form of learning.

“Action research, also known as collaborative research is an approach where the researcher forsakes their traditional role as observer of events and takes part with the subjects in the problem situation. (...) The research output comes through two parallel processes. Firstly, the researcher uses their theoretical knowledge to shape the activity they participate in; secondly, through their reflection on this experience, they can relate events to prior theoretical knowledge. Action research is often appropriate when a researcher has a specific skill or insight to offer, and can secure the collaboration of people within the research site to put those ideas into action.” (28)

Action research as used in the study comprises of research methodologies that aim to pursue action and research outcomes at the same time. It therefore has some components that resemble consultancy or change agency, and some that resemble field research. The focus is action to improve a situation and the research is the conscious effort, as part of the process, to formulate public knowledge that adds to theories of action that promote or inhibit learning in behavioral systems. One of the key characteristics of this approach collaboration, which enables mutual understanding and consensus, is democratic decision-making and common action. (29)

In traditional research, the researcher makes every effort to remain objectively remote from the system being studied. The researcher is separated from the system studied by a hard boundary and the system is reduced to one, or only a few parts, with the rest of the system assumed to be held constant. On the other hand, action research involves taking action in social systems of joining with other participant observers that enable the system to become a researching system with defined boundaries between the researcher and the system.

In this sense the action researcher is a practitioner, an interventionist seeking to help improve client systems. “This help takes the form of creating conditions in the behavioral world of the client system that are conduct to inquiring and learning. Lasting improvement requires that the participatory action researcher help clients to change themselves so that their interactions will create these conditions for inquiry and learning”. (30)

The reason for the flexibility in method design is that action research is designed to deal with and respond to “real world” situations, unlike mainstream research where one should start with a very precise research question.

Action research tends to be cyclic, participative, qualitative and critically reflective. And it is this process of critical reflection that distinguishes action research from everyday inquiry. (30)

The social process of learning about situations is inextricably linked with the acts of changing those situations. Those are mostly upsetting beliefs and habits in individuals and organizations, and they are hardly likely to be embraced easily and enthusiastically, even though there is a growing, and sometimes powerful, recognition of the need for change.

The process that the researcher uses to guide those involved can be seen as a spiral of action research cycles consisting of phases of planning, acting, observing and reflecting. (30)

In turn, by establishing conditions for the development of others, the action researcher increasingly acquires skills in such areas as the ability to build a shared vision, to bring to the surface and challenge prevailing mental models, and to foster more systemic patterns of thinking. Action researchers are responsible for building frameworks and networks through which people are continuously expanding their capabilities to shape their future. That is, action researchers are responsible for developing a learning environment, which challenges the status quo and frequently expressed in terms of orienting process criteria (e.g. participation, emancipation) and it seems worthwhile to continue to stress these characteristics to differentiate action research from other approaches to social change. (32)

Because the research involves complex and dynamic problems, exploring the social process of learning about situations is inextricably linked with the acts of changing those situations. In these systems the researcher must actively participate with others in the critical exploration of complex and dynamic issues

of implementation, which relate to the relationships between individuals, groups and their physical and socio-cultural environments.

3.2.2 From integration project to action research

This research combines theoretical knowledge with practical work. This approach facilitated a multidisciplinary research process (bringing in several perspectives, for example from anthropology, sociology and organizational theory). As a researcher I went through a learning process and the knowledge I acquired can be used to further theory building. Reflection on the experience can give material for further developments of the theory.

As a researcher, I brought in all the actors (stakeholders) that were working towards a given goal. The action research had therefore a triple focus: 1) to improve the situation, 2) to use existing knowledge and to gain and structure new knowledge and 3) to bring new insights into theories.

The work started before the first investigation of the literature. It is also an advantage because this allowed me to identify the real problems as an insider, something that could not have been done if I had followed the linear pattern of “book” action research, where the researcher comes as a “blank page”.

When performing my job duties at NHN, it became obvious to me that one group was consistently considered as a resource to be used but not as a resource with a potential that should be developed. This branch is characterized by a high-turnover, a “use and discard” approach

I encountered a high level of prejudice against the visible immigrants, for example when managers declared that a course was unnecessary because no one would attend. The solution was to adapt the course to the needs. As Berg and Verdi (1995) pinpointed, the programs should be adapted to a person’s individual needs and background.

Language training was built around themes that were relevant to the course participants (they were asked beforehand about their wishes for the course) and this led to a higher degree of motivation and self-confidence.

3.2.3 Overview of the various phases of the research project

Activity	Feb./Mars 2001	Mai 2001	July 2001	Sept. 2001	Nov. 2001	Jan. 2002	Mars 2002	Mai 2002	July 2002	Aug. 2002	Okt. 2002	Des. 2002	Mars 2003	Mai 2003
Appraisal interview (only foremen and staff), suppl. Literature, discussion of organization- plan	■	■												
First customers survey and first co-worker (appraisal-HES) survey		■												
Intervention–organization model/ diversity management application to funds for the language project			■											
Preparation for the language project, training of the teachers/supervision			■	■										
Ethical clearance		■												
In depth interview			■						■	■	■			
Language project – Norwegian course				■	■	■	■	■						
Formal education-courses (apprenticeship in cleaning)			■	■	■	■	■	■	■					
MOD courses (diversity and dialog)						■								
Second customers survey and second co-worker (appraisal HES) survey, suppl. reading						■	■							
Project estimating workloads/new working plans							■	■	■	■	■	■		
Report to Department of Work and Admin.								■						
Appraisal interview with foremen and staff								■						
Data entry								■	■					
Supplementary reading								■	■	■	■			
Research writing											■	■	■	
Dissemination of findings														■
Presentation of findings														■

Table 3.1 Overview of the various phases of the research project (time frame)

3.3 Survey and quantitative materials

3.3.1 Structured interview and the follow up one year later

The first structured interview (Health and Environment Study/alternate appraisal survey) took place in May 2001. 90% of all the employees in the study population accepted to participate. The follow-up interview was performed in February and March 2002 with participation over 85%. Both interviews were performed in the same way to ensure a basis of comparison.

The interview was given semi-structured and had a double purpose:

- To verify the specific objectives (see section 3.1)
- To assess the unfulfilled needs and desires in relation to the length of stay in Norway and the given working environment

Study population, selection of participants

The participants in the survey were the co-workers from the Section of Sanitation without management or administrative responsibilities. The participants of the observation and in-depth interviews included also those co-workers.

The co-workers with an immigrant background made up more than 85% of the total number of employees in the Section of Sanitation and came from over 25 different countries.

In the year 2000, most of the 15% co-workers with a majority background (ethnic Norwegians) held a leading position or an administrative staff function.

During the years 2001 and 2002, only people with foreign background, applied for work in the Section of Sanitation, with the exception of one application. The turnover during that time period was reduced compared with previous years.

All the co-workers from the Section of Sanitation working on site (NHN), in active duty were motivated to participate in the survey. None of those included held a leading or administrative position. All participation was voluntary. An additional verbal consent was given before participation in the interview.

Data collection of the survey

Qualitative interviews were performed with a combination of fixed response and open-ended questions, approved by the department HES and the representative of the local Labor Union.

The interviews were performed by a trained social worker with experience in the problems that immigrants and refugees face in the integration phase. The interviewer was trained in advance and only one person was used in order to ensure a solid basis for comparison. This person was not affiliated to the hospital or known by any of the participants.

All interviews were held in a room at the hospital, associated to the department.

Data handling

The questionnaires were given out in advance and supplementary questions were asked during the interviews. Because some of the participants to the interview had very poor Norwegian skills and because some of them were unable to write, the interviewer filled out the questionnaire for them during the interview.

Not only did this ensure the correct understanding of the questions, but it also allowed that the answers were registered with their full meaning. Furthermore it was effective and ensured that the data would be comparable for the follow-up study.

All information given was registered on the form. None of the individual forms were marked. This was done to ensure total anonymity towards the individual participant.

Data analysis

Partial analysis usually starts while collecting the data.

All the data given during the interview was written down in the questionnaire. Only additional data given was registered in the project manager's diary, during the entire study.

Based on a theoretical framework and systematized data, interaction patterns were identified and a comparison was done during supplementary reading.

Ethical issues

Because most of the respondents had poor or insufficient Norwegian language skills it was necessary that informed consent was explained verbally in addition to informing the respondents in writing, in the invitation letter one week before each investigation. Only participants, who, after we explained briefly about the research, methods and aims, wanted to participate, were included in the study. This was the case with all the participants coming to the location as scheduled in advance.

The consent obtained this way was recorded on paper.

The Declaration of Helsinki recommendations guiding ethical research were followed.

The Department of Health and Environment at the hospital and the local Labor Union were also informed and gave their consent to the study.

All interviews were conducted in a confidential environment and the respondents' answers were treated with absolute confidentiality.

Inclusion/Exclusion

All co-workers in active duty, belonging and working in the Section of Sanitation at NHN, without management or administrative duties, were included in the survey. Observation was registered with all co-workers in the section while only visible foreigners in various positions participated in the in-depth interviews.

Workers belonging to the Section of Sanitation, but for the time being, working at another hospital (Sophies Minde and RSO) in Oslo, were not included.

Other documents and written materials used in the study

All documents and rapports not classified as restricted and used during the study are enclosed in the appendixes.

4. EMPIRICAL MATERIAL/PRESENTATION OF THE STUDY

4.1 The National Hospital of Norway (NHN) - Rikshospitalet

4.1.1. General information about the NHN (34)

NHN is a highly specialized university hospital with special assignments in research and the development of new methods of treatment. NHN is a part of the "Southern Norway Regional Health Authority", and collaborates closely with the University of Oslo.

NHN's main tasks are to carry out advanced treatment of patients, research, teaching, and to give advice on a high international level, thus benefiting both present and future patients and society in general.

NHN has 585 beds. Half of these are for surgical patients, and one in four is reserved for children. 44 beds are for postoperative or intensive care. There are 27 operating theatres. Many of NHN's patients need advanced and expensive care.

28,000 patients are admitted annually to NHN as inpatients, 17,000 patients are given day-treatment, and there are 130,000 outpatient consultations per annum.

About 60 % of the patients admitted to NHN are referred from other hospitals requiring more specialized investigations and treatment. Therefore in Norway, NHN therefore plays an important part as a highly specialized hospital with expert knowledge of the treatment of rare and complicated disorders. NHN service the whole country in various fields. These include organ and bone marrow transplants, advanced neurosurgery, and treatment of children with congenital malformations.

NHN is an important hospital for the treatment of heart conditions for the population of South-eastern Norway. There is also a large paediatric hospital.

NHN is the regional hospital for patients from the Southern Norway Health Region, as well as being the local hospital for children in Asker and Bærum.

Members of the royal family, ministers, and members of the Norwegian Parliament (Storting) are treated there. Foreigners who need medical treatment while visiting Norway also receive treatment from the NHN.

New hope

The research activity in NHN spans from patient-related studies to cellular and molecular research. Special emphasis is placed on the basic biomedical and clinical research, as well as the establishment of links between the various groups of researchers. New discoveries are often made at the intersection between different professional fields. The researchers at NHN collaborate closely with the University of Oslo. A research centre with participants from the university's Preclinical Institute and NHN's Section for Molecular Microbiology is the only medical research centre to be granted status as a Centre of Excellence by The Norwegian Research Council. Several of the groups of researchers in NHN are recognized internationally. About 5-600 articles are published annually in international scientific journals.

The interaction between technology and medicine is becoming increasingly important. Modern methods of treatment need advanced equipment and a high level of technological expertise. At NHN's Interventional Centre, untraditional multidisciplinary teams are working on the boundaries of established knowledge. The Centre utilizes the synergy that arises when engineers, technicians, and health personnel collaborate to solve problems. This has resulted in new developments in image-guided and minimal invasive therapy.

The procedures developed here are passed on to other departments at NHN as well as to other hospitals.

Some of the researchers at NHN are from other professional fields. Much emphasis is also placed on research and development in nursing.

New generations of health personnel

NHN is an important training centre for the coming generations of health personnel. Students from the Medical Faculty at the University of Oslo receive important parts of their theoretical and practical training here. The hospital collaborates with Oslo College and The college of Diakonia and Nursing regarding the practical and special training of nurses.

Students of other health subjects such as psychology, physiotherapy, biochemistry, pharmacy, occupational therapy, and radiography also receive part of their training at NHN.

A challenging place of work

More than 4,000 people work at NHN. Nurses and other nursing personnel are the largest group. The hospital hosts 500 doctors and more than 1,500 nurses amongst its employees.

Buildings/architecture

In May 2000, NHN moved to the new buildings at Gaustad. The modern hospital buildings are flexible, making it possible to alter both objectives and organization as the need arises. The buildings are low-rise and well adapted to the terrain. There is nature right outside the windows. The architecture is characterized by air and light. This is based on the concept of a humanistic hospital where shapes, colors, and materials take care for people, creating a feeling of security.

4.1.2 Division for Internal Service / Intern Service (ISE)

NHN is also a challenging place to work for non-medical groups. Those groups are organized in the division for Internal Service. The division includes engineers, IT personnel, economists, statisticians, legal advisors, and service personnel working in different departments.

One of those departments is the Department of Supply and Logistics (*Forsyningsavdeling* in Norwegian)

The Department of Supply and Logistics is divided into five different units: the Unit of Childcare, the Hospital Kitchen, the Unit of Provision for Clean Textiles and Hospital Beds, the Unit of Transport and Storage (which includes Logistics) and the Section of Sanitation. The Department of Supply and Logistics is working on developing better systems for cost-benefit analyses, evaluation of the quality in the different department units as well as in all the other departments of ISE.

4.1.3 Section of Sanitation

The Section of Sanitation (*Renholdsavdeling*) is organizationally placed under the Department of Supply and Logistics (*Forsyningsavdeling*).

This qualitative study described in this thesis was performed at this Section of Sanitation. At the beginning of the study, the unit had co-workers both employed at the NHN (on site) and at a hospital far away from NHN at the other side of Oslo.

In the year 2001, over 85% of the total number of employees working at the section (up to 170) were from developing countries.

In the beginning of the year 2001 the management consisted of 11 “first-line managers” (all except one from Nordic countries), three Norwegian administrative members and one head of the unit.

Members, permanently employed of the management and administrative staff had no or insufficient formal education (generally not more than nine years of compulsory school) and only one member held a Certificate of Completed Apprenticeship and two members a one-year college education. In 2001 the section’s budget amounted approximately to 62 million NOK (805,090 USD) and it decreased to approximately 52 million NOK at the beginning of 2002.

Before 2001 the section had no permanently employed leading staff member with a business or management education or other higher education similar to a bachelor’s degree.

4.2 Projects

4.2.1 Sanitation sections in Norway

Sanitation sections or units in Norway have generally a very low status. This applies also in the case of NHN.

As statistics from SSB 2002 show, non-Western immigrants are over-represented in all types of cleaning jobs in Norway.

Recruitment patterns in this area of the economy have changed significantly over the last four years. Previously, applicants to those jobs were predominantly basic educated females with a Norwegian background. Because of the low pay and low status of those jobs, all applicants to cleaning positions in the year 2002 and the majority of applicants in 2001 were immigrants and refugees from countries outside the European Union.

At the beginning of 2001, approximately 85% of the employees had an immigrant background and this percentage was increasing significantly over time; all were performing blue-collar duties despite their, compared to ethnic Norwegian co-workers, high formal education from both Norway or/and overseas.

By the year 2001 the cleaners on active cleaning duty at NHN had never had an appraisal interview previously. This is despite the fact that both the national law of the 4.2.1977 (Law of working environment/ Norway) and NHN's internal quality regulations demand an appraisal interview at least once a year.

The leading authorities at the hospital registered a significant increase in the number of complaints concerning sanitation, cleaning and communication problems. In January 2001, the Norwegian newspaper Aftenposten informed about the poor cleaning condition at the hospital.

One month prior to the alternative appraisal interview, a survey addressing all the different departments and sections (medical and administrative) was performed. This unpublished service survey consisted of a questionnaire addressing the different managers of the hospital in order to identify the nature and extent of the problems.

The results of the survey showed that the complaints could be classified in the following four categories.

1. Misunderstandings and signs of xenophobia when the service was performed by a visible immigrant.
2. Miscommunication because of lack of Norwegian language knowledge and understanding of each other's working situation.
3. Lack of positive contact and service ability of the different cleaning foremen (first-line leadership)
4. Lack of expected quality or quality agreed upon

4.2.2 The co-worker survey as an alternative appraisal interview

The results of the alternative appraisal interviews performed in May 2001 and May 2002 were the basis for action based on the results of the study. The survey was based on questions from an appraisal interview and used as a substitute for a genuine appraisal interview.

The survey showed that more than 2/3 of all the foreign co-workers surveyed felt a need for an improvement of their language ability, as will be further developed in section 4.3.

When asked for the reasons why this was not undertaken after working hours, many students admitted that they had two jobs during the day or that they had children and a household to attend to, after regular working hours. It was further mentioned several times that taking up a loan the first years after arrival in Norway was very costly and difficult. In addition, only low-salary job opportunities are available to them. These factors all contributed to the need for a language course. At the time of the survey, this could not be satisfied.

Both general and specific information either did not reach the co-workers or was often misunderstood.

4.2.3 The Norwegian Language Course

Background

The implementation of the Norwegian language course was an action that resulted from the empirical findings in the first alternate appraisal survey (carried out in 2001).

Objectives to the course

The aim of the course was to improve the working climate, reduce the amount of misunderstandings, contribute to formal competence and personal safety, help avoid hospital infections, instruct employees with regards to the correct use of chemicals, enable individual participants to enroll in an Apprenticeship in Cleaning course and provide a better understanding of “how things are done” in Norway (e.g. how to file one’s income tax form, ...)

The course was a result of the individual co-workers’ needs and the expressed needs of their superior foremen. Both the foremen and the customers had by then complained about misunderstandings regarding working instructions, messages and orders. Misunderstandings were mentioned as one of the main factors that contributed to a negative working environment.

Surprisingly, over 110 participants wanted to join the course. Due to the big interest also shown from outside the section, the course was opened to other hospital staff that had an immigrant background as well. For some time the course had up to 150 participants each week. A particular interest in the course was expressed by those newly arrived in Norway – less than 5 years.

Interestingly it appeared that only co-workers who had been in the country for more than 15 years did not show a real interest for the aim of the course. These co-workers often had a much poorer vocabulary than co-workers from the same country that only had stayed in Norway for 5-8 years.

Duration, Place, Course hours and Course material

Duration:

The participants to the course were enrolled and pre-tested (for oral and written language abilities) in September 2001. Classes began in October and the course lasted until July 2002.

Place:

The course was given in-house. During the first semester the course was held in the directors' lounge. The second semester course was held in the meeting room of the section.

To the participants, attending the course in the hospital's administration's lounge and meeting room meant a lot more than offering the course in a regular room. This part of the hospital is usually only used by the top administrative directors of the hospital. This had a special and very positive impact on the program.

Course hours:

During the program participants were given the possibility to attend up to two hours a week. The course was given during working hours without a reduction of the weekly workload. The superior foremen were informed and gave their consent about the participants leaving their duty to attend the course.

Because the hospital's needs were prioritized, and the permission to attend a class at the scheduled time was not always given, classes were offered as flexible as possible. Any given lecture was offered several times within a week to allow for a maximum amount of participants to attend it.

Course material:

- Reading book: *Her på berget*; Elisabeth Ellingsen and Kirsti MacDonald
- Reading book and working material: *På vei*; Elisabeth Ellingsen and Kirsti MacDonald
- Easy reading weekly newspaper in Norwegian: *Klar tale*
- Test material from Norwegian authorities:
 - Eksempeltester for voksne innvandrere/høyre nivå;
 - Folkeuniversitet/høyere nivå
 - National hospital of Norway's guide for personnel questions and HES
 - NHN's guidelines for personnel and the quality insurance book for the HES department level 1

Number of participants and other demographic information

150 different participants were enrolled in the course during the two semesters.

72 participants completed both semesters.

61 participants completed only one semester; some of them started the second semester.

17 participants dropped out after only a couple of hours of training.

More than 20 different nations were represented in the course.

There were approximately 60% men and 40% women participating in the course. This is representative of the gender distribution of the foreign co-workers in the Section of Sanitation of the hospital.

Calculated costs of the course program

There was no budget for education specified in the existing fiscal year, therefore external funding had to be located.

In order to finance the training program, an application for funding of the course program was sent to the Ministry of Work and Administration.

The Ministry of Work and Administration financed the study with 400,000 NOK. This amount covered both the purchase of learning material, technical and pedagogical materials, the salary of the course teacher and supervisor, copying costs and examination fees for the students.

The costs amounted to approximately 2,600 NOK for each student enrolled during this year.

We have to mention that new courses could be held for the amount of 280,000 NOK for the same amount of students because of the already purchased materials and a slight reduction in school hours during the week.

Future courses in this section could be arranged for less than 1,900 NOK per student per year.

Information conveyed

Hospital information is normally provided through the internal Internet page, Riksnett. Due to the fact that almost none of the employees in the section have the possibility to enter this site, information was distributed on the information boards in different locations at the hospital. Additionally the information officer at the hospital provided information about the course or special arrangements in the internal newsletter "Riksnytt".

Method and course personnel

Methods used in the course program were traditional teaching methods, lectures from invited guests on special topics, individual exercises and group work.

Homework was given regularly.

The pedagogical curriculum was modified and adapted to the target group and the hospital's needs. The objective was to gain a better understanding and a basis to improve specialist skills in cleaning.

The course was held as an in-house training program and was connected with the vocational training program. The aim was to motivate the students to take the Certificate of Completed Apprenticeship in Cleaning.

Course personnel

The teacher, J. Peña, was a previous Oslo Red Cross project worker and project manager. She had previously shown a strong personal ability to motivate immigrants. She is Norwegian by birth with a good educational background. She had no formal pedagogical education. Therefore a supervisor from the Faculty of Education, G. Dubowsky, supervised the program and teaching methods.

The responsible for the project was myself, U. Goth.

At that time, I held a Master of Business and Administration, a B.Sc. (nursing) and a one-year training at the Faculty of Education at the University of Oslo. During my time as a project manager and head of the section at the NHN, I was also a student in the Master program at the Institute of International Community Health, medical faculty.

Results and feedbacks about the course

The positive interest and response from both the target groups and their working environment were greater than expected. The challenge was to get the right mixture of participants in the different courses, both regarding their language level and their interests. Combinations with gender and religion were not considered and we did not get any feedback about these issues during the entire period.

During the periods when the number of employees on sick leave was high, the participation in the course was lower. This is because the remaining employees had to cover more than their own working area during those periods in order to avoid infections in the hospital. The second-semester classes clashed with the classes for the Apprenticeship in Cleaning.

Because the course was open to different professions in the hospital, positive relationships were built across departments regardless of the employees' positions. Nurses, bioengineers, transport and logistic workers were learning together with the cleaning staff. This contributed to the development of a nice and positive atmosphere. Status and profession were not shown or demonstrated in any way within the group.

A small group of nine persons could not gain sufficient knowledge of Norwegian. All the members of this group had one thing in common: they were all refugees who had experienced torture and persecution. In this group, it was evident that participants experienced concentration problems and suffered from low self-esteem. Those students did not find sufficient motivation in attending the regular part of the course, therefore the course leader had to use a different pedagogical technique with them. She first elicited the individual needs of the student together with them, then adapted her teaching to those needs within our outside the classroom (during the hours set aside for individual supervision).

The participants that achieved the best results and showed the greatest motivation for learning were the new comers (i.e. those that had spent less than five years in Norway). Those participants had mostly an educated background and looked at their present job as a transition phase before being able to work in their previous professions.

The course also opened up the possibility for other internal courses and further education programs.

Results

Language skills are also seen as an economic security.

Focusing on and giving attention to a usually insignificant group of co-workers such as recommending and arranging courses, media attention (“Klar tale” or articles in the hospital’s intranet), are of highest significance.

Culture training, which was a major topic during the language course, turned out to be the most important part of the training program.

4.2.4 Course and training-program to obtain the ”Certificate of Completed Apprenticeship in Cleaning”

Background

The course to obtain the “Certificate of Completed Apprenticeship in Cleaning” was an action taken as a result of the empirical findings in the first alternate appraisal survey (carried out in 2001). An average over 10 % of the cleaning personnel requested the possibility to take this certificate. During the survey, many co-workers with an immigrant background expressed the desire to go through the apprenticeship. However, their wish to take this course was almost impossible to fulfill first because of their poor language skills and second because the only way they could improve those skills was to take a course outside working hours, which was highly impractical for them.

The existing level of updated knowledge on the topic of cleaning was rather limited. Only 2 of the 11 area managers (first-line) had a Completed Apprenticeship in Cleaning and no other relevant formal education in the subject (in Norway the equivalent education is home economist/*husøkonom*). This very low level of formal education is regarded as one of the participating factors to a relatively poor quality in the work performed at the hospital. The lack of efficient on-the-job training might have resulted not only in health problems

amongst the workers (for example due to a lack of awareness regarding ergonomics at work) but also in damages to the hospital environment (due for example to the use of chemicals that are harmful to the surfaces on which they are applied) and health problems amongst the hospital patients (due for example to the use of chemicals that may produce unsafe gas emissions).

No budget had been set aside for the purpose of education for the existing fiscal year, which meant that external funds had to be located.

In order to finance the training program, an application for funding the course program was sent to Statskonsult.

Statskonsult, the Directorate for Communication and Public Management, bases its work on the set of values and administrative principles that underlie government administration in Norway, and that are necessary for the development of the Norwegian Welfare State. With its independent role in the administration, Statskonsult may take initiatives that support a desired development within the areas of performance management, restructuring and organizational development, information technology planning and coordination, internationalization and management development.

The application was approved and the Section of Sanitation received an amount of NOK 171,300 as funding from Statskonsult. This funding allowed for 20 individual students (co-workers) to enroll in the course. Unfortunately only 18 fulfilled the language requirements in order to be able to follow the course program.

Objectives of the course

- To ensure the quality of the cleaning work performed at the hospital
- To avoid health problems for workers and patients within the hospital environment
- To ensure knowledge of ergonomically working procedures
- To update knowledge of cleaning procedures
- To increase the individual's self-confidence and his or her ability to compete in the working environment in Norway.
- To increase the level of formal education of the individual.

Duration, place, course hours and course material

Course-holder and duration:

The course requirements to complete an Apprenticeship in Cleaning consist of both a practical element and a theoretical element.

The theoretical part was given as a course provided by the Technology Institute of Oslo. The practical part was provided by the hospital itself.

In September 2001, 18 participants were enrolled in the course. The course holder, the Technology Institute of Oslo (Teknologisk Institutt Oslo; www.teknologisk.no), is a private organization with experience in training participants for the Apprenticeship in Cleaning.

The course was held from 8 a.m. to 5 p.m. once every third week over a period of eight months.

Place:

The course was offered in the compound of the hospital.

Course material:

- Renhold Microbiologi; E.L.Hagesæther, Yrkeslitteratur as, Oslo 1996
- Renhold Fysikk; K.B. Danielsen; Yrkeslitteratur as, Oslo 1996
- Renhold – harde materialer; Yrkeslitteratur as, Oslo 1997
- Arbeidsmiljøloven; lov av 4.februar 1977 nr. 4; ajourført med endringer 26.6.98 nr. 43 og fra 1.1.99

Curriculum:

The curriculum covered a wide variety of diverse subjects. These included:

Historical perspective of cleaning and cleaning methods, chemistry, microbiology, hygiene, science of engineering and building materials, ecology, manual methods, planning, mechanical methods, science of textiles, training and training methods of new workers, report writing, methods of control and measurements, special cleaning methods, HES and internal control.

Participants:

18 participants were enrolled in the program. 6 of these held leading position, the remaining 12 were cleaners.

12 out of 18 were immigrants (visible immigrants).

During the course one Norwegian participant left the course due to a job offer outside Oslo.

11 of the foreign participants had none or little recognized formal education in Norway. All of them had spent more than ten years in the country. Only foreign participant holds a M.Sc. from a Norwegian University.

All participants have worked as cleaners only since they started their careers in Norway.

Seven different nationalities were represented at the course.

Course personnel and methods:

P. A. Løvstad who had previously worked as the head of the section at The NHN and was now working at the Teknologisk institutt He has a strong background as a cleaner, work foreman, head of a Section of Sanitation and holds a Completed Apprenticeship in Cleaning.

Methods used in the course program were traditional teaching methods, lectures from the course leader, individual exercises and group work.

Homework was given regularly.

Calculated cost:

Study fee for the participants: NOK 140,000

Exam fees: NOK 11,300

Cost for traveling and course material: NOK 20,000

Total cost of the course: NOK 171,300 which amounted to an estimated cost of NOK 17,000 for each student.

All the costs were covered by the funding received.

Exam and test results:

The examination that sanctioned the completion of the Apprenticeship in Cleaning consists of two parts.

In the first part, formal knowledge was tested through a six-hour exam. Students who did not feel comfortable with their writing skills had the possibility to take a two-hour oral exam instead. This alternative method of examination had not

been used previously due to the course organizers' lack of awareness to language difficulties among the students.

In the second part, the practical knowledge was first tested after a positive result on the formal exam on site.

Of the 17 participants, 4 did not pass the requirements for the exam.

Both the participants and the executive body of the testing institute expressed that language was the major cause for failing the exam.

Those participants were invited to take a new exam the following year.

4.2.5 Diversity management

The basic concept of the introduction of diversity management to the section was equal salary and equal advancement possibilities regardless of ethnicity and religion. (11)

This is mentioned in all the basic guidelines in Norwegian state institutions but it is not carried out in practice. In the section studied here, in the year 2001, all permanently employed managers and administrative staff members had a European background. The majority of foremen were ethnic Norwegians. It was generally considered impossible to give leading or administrative positions to members of the cleaning staff originating from countries outside Europe. The argument was that their Norwegian language skills were too poor to fulfill the requirements of the position.

In March 2001, Aetat (the Labor Market Administration in Norway) applied for a training placement for a South-American administration student. She was a female co-worker with training in accounting, bookkeeping and personal management. Despite her adequate language skills the negative reaction from the ethnic Norwegians was greater than expected.

In June 2001, a visible immigrant was offered a permanent leading position for the first time. He was working as deputy head of the Section of Sanitation and as co-coordinator for the foremen in the section. He holds a Bachelor in Science from a Norwegian University and was previously working as a foreman in vacancy for one year and as a cleaner for many years.

During the 18 months of the project, another four visible foreigners (origin from outside Europe) were promoted by internal recruiting for management or administrative positions. All were performing an excellent job (see the results of the survey in section 4.3). During those employment procedures, both union leaders and reference personnel were included. A rule was made that all involved personnel, as named above, had to agree to the selection of the chosen applicant.

Due to the growing anxiety among the ethnic Norwegian co-workers a D&D (D&D stands for Diversity and Dialogue and is equivalent to the Norwegian acronym MOD (*mangfold og dialog*)) course was offered to a number of key employees: the head of the Labor Union, members of the HES department, the safety deputy, foremen of the Section of Sanitation, section managers and the head of the Department of Supply and Logistics.

D&D is an action-oriented program for individuals, companies, organizations and local communities to promote human dignity, justice and equal human rights. This process-orientated program was based on group dynamics and aimed at raising awareness. The goal was to work against all forms of racial and ethnic intolerance, prejudice and discrimination, and to work for participation, representation and respect for the individual worker. The aim was to challenge the participants to be aware of their own reactions and attitudes by raising questions and seeing things from different perspectives.

The encounter with diversity is the encounter with oneself (11). Focus was placed on the consequences of racism in society and the consequences for the victims.

Unfortunately the head of the department, representatives of the Personnel Department and the other section managers did not participate. This could be interpreted as being due to a certain lack of awareness of the importance of the subject.

After the D&D course, the project manager encouraged course participants to be more active in the election process both within the Labor Union and for the HES representatives of the section. Due to the high turnover and the previous lack of focus, many representative positions were not filled.

While the HES representatives showed a representation of foreign co-workers, the local Labor Union did not.

Another change after the D&D course was the ability that course participants developed to see some of the advantages foreign co-workers could bring to the hospital. While previously nobody wanted to work during Easter and Christmas, plans were now made to change the schedule according to the individual co-workers' religious needs. The positive effect of these measures could be seen in the significantly lower sick leave during those periods compared with previous years (overview in appendix E)

While many co-workers with an immigrant background were looking forward to gaining other positions within the hospital or other job possibilities, a certain amount of resentment was seen among the co-workers with a Norwegian background.

It was especially true amongst Norwegians with the least formal and informal education, who were most critical. Co-workers with an immigrant background had to cope with negative and destructive gossips on a daily basis.

4.2.6 Temporary staff desk - Vikarpool

NHN's control data showed that there was a lack of personnel on a daily basis reaching to over 10% of the required staff level.

During the alternative appraisal interview, the co-workers expressed a need for an organized service that would provide staff at a short notice. As experienced cleaners, they had to take over the workloads of their sick colleagues up to several days a week. This resulted in both exhaustion (and an increase in sick leave) and a reduction in the quality of the performed work.

In order not to overload the individual co-worker with work, a Desk for Temporary Staff was established. 20 of the best co-workers who applied for a position were employed at this desk. This system proved to be very successful and contributed to the reduction of sick leave and the stabilization of the level of quality (appendix E). Those results were confirmed during enquiries both with the customers and the foreman.

The Desk for Temporary Staff was fully developed and implemented by M. Kildalen and her deputy A. Peña.

4.2.7 Projects in progress

The projects in progress in the summer of 2002 were:

- the estimation of the time-consumption regarding different working procedures and the updating of working plans (control of the individual workload for cleaners) and
- an application for a follow-up Norwegian language course.

As seen in both alternative appraisal interviews and as confirmed later due to control, the previous work plan system was inadequate and not updated. Rooms were “forgotten”, registered work was insufficient, and workload was not equally distributed. Under a test we found that co-workers employed in equivalent positions had work-loads that differed up to 80%! New procedures were implemented to obtain more accurate estimates of the amount of cleaning work required for every single room in the hospital. This was necessary because there was a need to draft a service contract with each one of the departments in the hospital and, as a result, there was a need to calculate the exact amount to be billed internally to the departments for the cleaning services they were using. In addition, the workload had to be distributed more equally amongst the workers. In order to facilitate the implementation of the new procedures, the section invested in a software program called “Renplan”. The process of moving from one system to another was carried out as an eight-month project.

An investigation of the system uncovered an unexpectedly significant divergence between the information available in the system and reality. Fails in the previously used system “Creo” resulted in incorrect work descriptions. The amount of work to be carried out varied considerably from one cleaner to the next and was distributed incorrectly over the various areas of the hospital and many areas and working procedures are “forgotten”. The logistical planning was highly inappropriate. This resulted in a situation where a number of areas in the hospital were not cleaned in an adequate fashion. In addition, the workers experienced the constant variations in the amount of work as unfair. This issue became a core concern and the management focused on solving it. It may be mentioned that, due to the incorrect stored information, the new software used (Renplan) had to be established from scratch and all updated information was stored in this software program. This new program also allowed an internal billing system as desired used by summer 2003. Because of the lack of

personnel with sufficient programming skills, the section employed on a short-term contract a qualified computer specialist recruited from Aetat. This African co-worker holds a master in computer science from Trondheim and was the key person who allowed that the project could have been fully implemented by Mars 2003.

The survey in 2002 showed that a prolongation of the Norwegian course would be highly desirable by all stockholders. After sending the project report and the documentation for the budget of the project in May 2002, the hospital was informed of the need to apply for funding for a follow-up course in October.

4.3 Chronological survey / appraisal HES survey

In both surveys, questions were given in the same manner and within the same context. Only the answers to the questions of relevance to this paper will be presented here and we chose to present them in subgroups. A copy of a complete questionnaire is enclosed in the appendix.

To optimally illustrate the changes caused by the implementation of the program during the period of 12 months, the relevant questions will be presented below. The questions that remained identical from year 2001 to year 2002 (follow-up study) will be presented together.

The questionnaire was based on open ending questions to provide the interviewee with the maximum amount of freedom of answer. The answers were then categorized in cluster format.

The co-workers were invited to participate in voluntary interviews. The interviews were both anonymous and confidential. In order to maintain the level of confidentiality, anonymity and professionalism, an outside professional was brought in to conduct the interviews. The interviewer was not a hospital

employee and was therefore an unthreatening presence for the interviewing co-workers.

Workers included in the study population received an invitation letter with explanations several days prior to the interview. They were requested to reflect on the questions in the questionnaire in advance.

The participating co-workers were divided into four categories.

- Ethnic Norwegians,
- Immigrants that had been working in the hospital for less than one year,
- Immigrants that had been working in the hospital between one year and five years,
- Immigrants that had been working in the hospital for more than five years.

Immigrants in this study group were all first-generation immigrants. There were no second-generation immigrants participating to the interview.

The need for further education

In questions 5 and 6, the following questions were asked.

Do you have the need for further work-related education?

Do you feel the need for more general education? (Appendix B)

2001				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>Need for more education</i>	25%	89%	88%	64%
<i>No need for more education</i>	58%	7%	12%	32%
<i>Don't know</i>	17%	4%	0%	4%

Table 4.1: Need for further education, answers from 2001

In 2001 a sharp contrast between ethnic Norwegians and co-workers with an immigrant background was registered. Almost 90% of the participants with a

foreign background that had been working in the hospital for up to five years expressed the need for more education, namely Norwegian classes, courses that lead to Apprenticeship in Cleaning or courses in order to get their previous education recognized. In the group of immigrants that had been at the hospital one year or less, the need for Norwegian courses was expressed as the most pressing necessity.

Only 25% of the ethnic Norwegian co-workers felt the need for more education. In this group, the education they wished for consisted of courses that lead to the completion of the Apprenticeship in Cleaning.

The majority of non-ethnic Norwegian co-workers expressed the need more as a dream but did not believe that any courses could be available for them. This could explain the vast difference between the groups.

In the group of ethnic Norwegians, only two co-workers had the need for courses leading to a Completed Apprenticeship in Cleaning.

In the group of co-workers with an immigrant background and under one year of employment in the hospital, all the interviewees that had answered positively to question of whether they needed further education expressed the need for Norwegian courses during working hours and courses that led to a Completed Apprenticeship in Cleaning.

In the group of co-workers with an immigrant background and between one and five years of employment at the hospital, all those that had answered positively to the need for further education expressed the need for Norwegian courses during working hours and courses that lead to a Completed Apprenticeship in Cleaning.

In the group of co-workers with an immigrant background and an employment record of over five years that had answered positively to the question of whether

they needed further education, all expressed the need for both Norwegian courses during working hours and courses that lead to a Completed Apprenticeship in Cleaning.

The following arguments were given:

- The need for education due to the lack of other formalized or recognized education in Norway,
- Norwegian courses during working hours are important as there is no real possibility to attend Norwegian courses after the regular duties at the NHN (due to the fact that they had two or more jobs, children to take care of in the afternoon, and lived far away from the available courses)
- To secure their work situation
- To better understand the expectations of the foremen and the customers

2002				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>Need for more education</i>	47%	100%	92%	75%
<i>No need for more education</i>	53%	0%	8%	24%
<i>Don't know</i>	0%	0%	0%	1%

Table 4.2: Need for further education, answers from 2002

In the year 2002 a contrast between ethnic Norwegians and co-workers with an immigrant background was registered. Compared to that half of the ethnic Norwegian co-workers expressed the need for further education, the majority of non-ethnic Norwegians did. This represents a substantial increase since 2001.

In the group of ethnic Norwegians, 47% expressed a need for further education. This consisted exclusively of courses that lead to a Completed Apprenticeship in Cleaning. All the people in the group of co-workers with an immigrant background and up to one year of employment in the hospital who answered positively to the question of whether they needed further education expressed

the need for Norwegian courses during working hours and courses that lead to a Completed Apprenticeship in Cleaning.

Within the group of co-workers with an immigrant background and an employment record over one year and up to five years of employment answering positively to the need of further education, the respondents also expressed the need for Norwegian courses during working hours. 80% expressed the need for courses that lead to a Completed Apprenticeship in Cleaning and courses that lead to recognition of their previous, foreign education.

Within the group of co-workers with an immigrant background and an employment record of over five years, those answering positively to whether they felt the need of further education expressed the need for both Norwegian courses during working hours and, if they had not completed the apprenticeship previously, the need for courses that lead to a Completed Apprenticeship in Cleaning. Nobody in this group expressed a desire for courses with the aim to fulfill the requirements for recognition of a previous education.

When comparing the answers given in 2001 and 2002, it is evident that focusing on further education (apprenticeship and Norwegian language classes) resulted in increased needs for further learning in all the groups.

Comparing the results of the 2001 and 2002 surveys, it may be seen that there was an increased need, in all the groups, for further education.

Welfare at work

Question 10 dealt with the issue welfare at work. It was investigated with the following question:

What could the hospital do to increase your welfare at work?

(Appendix B)

The answers to the question were relatively vaguely expressed. Therefore it was felt that a clustered presentation of the answers was perhaps the most appropriate presentation format in this particular situation.

The interviewer clustered the answers to question 10 based on the answers given.

2001				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>Stable working area</i>		*		
<i>A reduced amount of work</i>	****			
<i>Permanent work contract</i>		****	***	*
<i>Equal work distribution</i>		**	**	***
<i>Increased leadership skills ❶</i>	***	***	****	****
<i>Social interaction (during working day)</i>	*		*	**
<i>Higher salary</i>	**			

❶ Communication skills, attitude towards subordinates, training and assistance

The star symbol () is used to illustrate the importance of the issue. The decreasing of amount the star symbol (*) reflects the decreasing significance of the issue.*

Table 4.3: Welfare at work, answers from 2001

There was a sharp contrast registered in 2001 between the answers given by ethnic Norwegians and those given by co-workers with an immigrant background. In addition, there were differences among the co-workers with an immigrant background, depending on how long they had been working at the hospital.

Almost all of the ethnic Norwegians expressed a desire for a reduction in the amount of work they had to perform. The next preferences for the ethnic Norwegians were for increased leadership skills among their supervisors. “Increased leadership skills” consisted in a number of elements: increased communication skills, better attitude towards subordinates, better training and increased readiness to offer assistance. The second last category of preference was a desire for a higher salary, despite the fact that this group had on average the highest income in the section. The final preference was for the need for social interaction particularly during their working day.

Almost all of the newly employed immigrant co-workers (up to one year) expressed the need for a permanent work contract. At the time of the survey almost none of the co-workers had a contract for more than three months. The second important need expressed was more leadership skills among the employees’ superiors. As mentioned above, this lack of leadership skills consisted in a deficiency in communication skills, a lack of correct attitude towards subordinates and a lack of training. They expressed many issues such as being treated differently due to their ethnic background; the lack of patience of their supervisor when they were expressing their demands and the manager’s lack of sensitivity to the workers’ practical and religious needs such as holiday leave for their religious festivals.

The third important unfulfilled need was to reduce the inequality in the distribution of work mostly due to the incorrect data in the existing system. As it was later proven, working loads were distributed unevenly across groups. This group was generally assigned to working plans that required a larger amount of work.

In the groups of co-workers that had been working up to 5 years and more than 5 years, with an immigrant background the same needs and issues were raised. The difference was their order of preference.

The most important issue was the lack of experienced leadership, followed by the need for receiving a permanent contract.

2002				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>Prolonged Norwegian course</i>		****	*	*
<i>Permanent work contract</i>				
<i>Reduced amount of work</i>	****			
<i>Equal treatment</i>		*		
<i>Equal work distribution</i>		**	**	***
<i>Better communication</i>				
<i>Defined work tasks</i>				
<i>Increased leadership skills ❶</i>	**	***	****	**
<i>Social interaction (during working day)</i>	***		***	****
<i>Higher salary</i>	*			

❶ communication skills, attitude towards subordinates, training and assistance

Table 4.4: Welfare at work, answers from 2002

A series of new measures were taken as a result of the 2001 survey. After those interventions, a new survey was carried out in 2002. The apparent change in attitudes and responses among respondents may be due to the intervention resulting from the information gathered from the first survey.

A comparison between the two years will follow.

Ethnic Norwegian co-workers

Members of this group had their focus both years on reduced amounts of work, organized social interaction (lunchrooms,...), increased leadership skills for their managers and a higher salary.

The elements of the answers were exactly the same as in the previous year. The only change was in the ranking of the various elements.

Almost all of the ethnic Norwegians expressed the desire to see a reduction in the amount of work they had to perform. The next preference for this group was the need for social interaction particularly during their working day. The second last category of preference was improved leadership skills for their superiors. The lack of leadership skills was described as a lack of communication skills, a negative attitude towards subordinates, a lack of training and a lack of readiness in offering assistance. The final preference was a desire for higher salary.

In the group of the newly employed immigrant co-workers (up to one year) the need for the prolongation of the Norwegian course was expressed as essential. The second important need expressed was an improvement in their superior's leadership skills. Unexpectedly, co-workers experienced a lack of leadership skills exclusively among the ethnic Norwegian managers. Although it is not apparent in the table, it was confirmed during the interview that the managers with a foreign background were highly respected. Insufficient leadership skills were described as deficiency in communication skills, gossiping behavior, incorrect attitude towards subordinates and the lack of offered training. They expressed many issues such as different treatment because of their ethnic background. The third important desire uncovered in the survey was for a more equal work distribution. As it was proven later, working loads were distributed differently and this group was on average assigned the most work-intensive work areas. Finally the lack of equal treatment was mentioned several times.

When asked why they had not taken this up with their superiors, the respondents answered that that they feared they might lose their possibility of new work contracts or experience other difficulties.

The needs of the group of co-workers working up to 5 years and more than 5 years with an immigrant background were the same issues as those of the new comers. The difference was their ranking in priority.

The most important issue was the lack of leadership skills among their Norwegian supervisors, followed by the need to obtain a permanent contract.

The need for equal treatment was not seen as a priority, but they focused more than earlier on the possibility for social interaction during their breaks. They desired the opportunity for information exchange, discussing with others issues concerning both their work and private lives.

Future plans of the individual co-worker

Question 11:

What plans do you have for the future? (appendix B)

The purpose of the question was to discover whether the position as a cleaner was seen as the ultimate possible work for the respondent or if he or she aimed for another type of work.

The answers were categorized in the following five categories:

1. No further plans meaning continuing to perform exactly the same work in exactly the same position without any plans for further education;
2. Norwegian language courses off duty to improve their Norwegian skills;
3. Vocational training for further education, earning a degree or diploma of proficiency either in the previous or in the present occupation;
4. Other education such as driving license, foreign language courses etc.;

5. Change of profession with plans for applying for another position based upon previously approved education.

2001				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>No change, no further plans</i>	59%	68%	63%	83%
<i>Norwegian courses off duty</i>	<i>n.a.</i>	7%	5%	11%
<i>Vocational training/education</i>	18%	14%	9%	0%
<i>Other education</i>	23%	11%	23%	6%
<i>Change profession/job ❶</i>	<i>1 co-worker</i>		<i>2 co-workers</i>	

❶ change of profession by further education and advancement to laboratory assistant at the hospital (3 co-workers)

Table 4.5: Plans for the future, answers from 2001

In 2001, within the group of ethnic Norwegians, almost 60% did not have further plans to change their job or educational situation. 18% in this group wanted to obtain a Completed Apprenticeship in Cleaning and 23% wanted to expand their knowledge of foreign languages or obtain a driving license. In the group of co-workers with an immigrant background, the desire to continue working in the same position increased depending on the length of their employment record in the hospital (68% for the newcomers – 83% for employees with a working record of over 5 years)

2002				
	<i>Ethnic Norwegian</i>	<i>0 – 1 year</i>	<i>> 1 – 5 years</i>	<i>> 5 years</i>
<i>No change, no further plans</i>	66%	33%	42%	40%
<i>Norwegian courses off duty</i>	<i>n.a.</i>	30%	18%	15%
<i>Vocational training/education</i>	27%	14%	10%	25%
<i>Other education</i>	7%	9%	5%	10%
<i>Change profession/job ❶</i>	0	<i>3 co-workers</i>	<i>2 co-workers</i>	<i>2 co-workers</i>

❶ change of profession is the further education and advancement to laboratory assistant at the hospital.

Table 4.6: Plans for the future, answers from 2002

In 2002 the importance and/or preference for further education is apparent. This shift is possibly due to previous interventions.

In the group of ethnic Norwegians, almost 66% did not have further plans of changing their job or educational situation. 27% of the group wanted to obtain a Completed Apprenticeship in Cleaning and 7% wanted to take minor courses such as driving license.

In the group of co-workers with an immigrant background, the wish for continuation in their job increased with the length of their employment record in the hospital (33% for newcomers – 44% for employees with a working record for over 5 years).

When comparing with the investigation in 2001 it is evident that there has been a significant shift regarding employees' future plans. As expressed by many co-workers, the reason for the change was that they now felt that there was a possibility for them to gain a leading position or to fulfill the requirements that would allow them to return to their previous profession. The increase in demand for vocational training/education was another significant shift noted within the group of ethnic Norwegian co-workers.

4.4 Discussion and Analysis of Individual Findings

4.4.1 Discussion and analysis of findings from the Language Course

This section will present the findings from the interviews with the course leader J. Peña and six of her students. The interview was conducted after the course terminated, both in autumn 2002 and spring 2003.

Planned results

In Norway all foreigners have the possibility to attend free Norwegian language training for up to 500 hours. Despite the fact that those courses are free of

charge, over 65% of the enrolled students had taken less than 240 hours.

Reasons given by the male students were low income and the need to have two jobs on a regular basis in order to cover their living expenses. Female students mentioned that they were working during the day and had to take care of their children and home during the evening, while their partners were still at work. It appeared that the students, co-workers at the Section of Sanitation, did not have a public school offer they could participate in.

It was planned that all the students on a voluntary basis, should participate in an official language test (Bergens testen/ Proficiency level of Norwegian) at the end of the project.

Due to a decision of the Department of Supply and Logistics, the project lost the classroom with a 72-hours notice prior to the last course. Lessons had to be cancelled and the continuation of the program could not be secured.

Students' motivation

The students' motivation to take the course was based on their desire to achieve a better knowledge of the Norwegian language. Most of the students, as expressed by the course leader, had a dream of another job more relevant to their previous education or practical skills.

In the beginning most students were shy and felt uncomfortable speaking out loud in the classroom. Only a few students were willing to produce written work in Norwegian and it seemed that many felt very embarrassed about their writing skills. Over the short period of ten months, most of the students developed self-confidence in their language skills.

At the beginning of the course, almost none of the students wanted to participate in an official language test. By the end of the course over 50% felt they could go

on to a language exam and would have done so if the course had not been cancelled due to the NHN's internal logistic problems.

Adaptation of the course and course program

As mentioned previous, both students and the course leader agreed that the course program was adapted to the students needs. The course program had three different levels. Due to the fact that the course lessons were given during working hours, it was not possible for the individual student to attend every time of the assigned classes. Therefore, any student had the possibility to take the same class at three different times during the week. This flexibility was necessary in order to reduce the risk of a high dropout rate.

Attitude towards the project

Both the students' and course leader's opinion was that everybody in the hospital theoretically had a positive attitude towards the project. In practice, the feedback was quite different. Both the course leader and the students had negative experiences, both from the Norwegian foremen in the Section of Sanitation and from the top management of the Department of Supply and Logistics. The impression both students and course leader gained was that the management did not appreciate the course at all and that the results and advantages of the course were not recognized. One example mentioned was that the only room available for teaching was given to another section in the hospital, as mentioned earlier on a 72-hour notification. Despite the short notice, this room was not used for the first six weeks. No alternative room was provided in order to finish the program.

When being interviewed, the teacher J.Pena, as well as the students, mentioned difficulty in coping with racist statements and expressions of envy made either by their foremen or from their Norwegian co workers.

Self-esteem and motivation of the students before and after the course

Both the students and the course leader are convinced that the course had a strong and positive impact on the students' self-esteem.

Individual findings of the Language Course

Answers from the students, given during the personal interviews and group discussions of both the course leader and the project leader were uniform. Feedback from the students was unanimously positive. Most of the students pointed out that the course had provided them with the possibility to reach their goals. Goals included other positions in the hospital or being able to take further studies such as the Complete Apprenticeship in Cleaning. Their various answers were positive concerning the information given about Norwegian society and how things are done in this country. Many students pointed out the advantage of having "somebody to ask" who knows the answer. Filling out different application forms and tax papers, questions about the Norwegian health system, applying for example to different courses and schools were among the examples mentioned.

Almost all students confirmed that they looked forward to the classes every week.

More than 10% of the students took action to go back to studying, something that they did not previously venture into. This was something they did not even imagine would be possible six months earlier. These results were due to the implementation of the course.

The results presented from the ethnic Norwegian foremen were quite different.

Most of them did not "appreciate" the course offer. When asked for reasons why they did not appreciate the "Norwegian classes" some responded that this course was a mean for the individual cleaner to obtain extra free time, that the co-

worker would not gain knowledge of Norwegian or that the Norwegian co-workers did not receive any similar offer.

4.4.2 Discussion and Analysis of findings from the structured interview

The following discussion and analysis will focus on the two major areas: Language training and Diversity management.

Language training

The interest in the implementation, participation and the prolongation of the language-training course was much higher than expected. This was regarding literature, practical experience by the authorities and the project manager's own expectations.

Both surveys and the observations of the individual students showed that the knowledge of the Norwegian language was a high priority for the individual. During the first survey the project manager was informed that the majority of students did not have a realistic option concerning the public education offers available in Oslo. As mentioned earlier, most of the participants in the language course had to work two individual shifts (morning and evening) or take care of their domestic duties.

The interest in the course and ability to participate increased over time and the students' self-esteem was generally growing. During the first course students started to develop future plans, something they had not done before the beginning of the course. This is apparent when comparing the answers to question 11 given in 2001 and 2002.

Diversity management

As explained previously the Section of Sanitation did not at the beginning of the study have any visible immigrant permanently employed in a leading position.

As the survey showed many co-workers were unsatisfied with their superiors' leadership skills. When analyzing which managers were implied, the answers pointed directly to the ethnic Norwegian managers. During the year there were several natural openings in leading positions. Internal recruitment seemed to be the best choice when considering factors such as motivation and local knowledge.

During an internal recruiting process, representatives (3 members) of the staff and the Labor Union chose the new foremen. Qualifications required included a fluent spoken Norwegian as well as one other language, participation to a course leading to the Completed Apprenticeship in Cleaning, hospital experience and personal qualifications such as social intelligence concerning the interaction with customers and co-workers.

The results of the implementation of diversity management were not only positive. As seen in the survey of 2002 co-workers with an immigrant background and customers were totally positive to the new foremen's leadership skills which was also visible in the more detailed sick leave statistics. The negative results can be described as xenophobia and was experienced as envy and negative gossip.

Diversity Management can also be seen as a strategy for better economic results as the quality of work was increasing and sick leave was significantly lower in the areas where it was implemented.

Project diary

The diary was used on a daily basis to register information, interactions and changes. Due to the sensitivity of personal information the diary was kept out of sight from anyone else than the diary's owner and only used for triangulation and reflection during the study.

The research diary was seen as a companion of one's own research and development process summarizing all research activities and changes. It is through the diary that the development of ideas and insights during the various phases of the research process became evident.

Project report

The project report written to the funding body of the language project is enclosed as appendix D.

NOU Rapport

The *NOU Report* is a report written and published, during the winter of 2002/2003, by the *Norsk offentlig utredning* (Norwegian Comity for Public Assessment). See appendix F for an extract for the report.

B. Berg, the thesis mentor, working as a senior researcher at SINTEF worked as an advisor and contributor to the NOU report and relied on information gathered throw this project.

5. Summary

5.1. Discussion of findings

5.1.1 Language training and vocational training (apprenticeship)

In European countries, when the labor market integration of immigrants and their descendants is beginning to be perceived as a “problem, the first stage of reaction is often to treat this as a supply side issue and direct training at the immigrants themselves” (11).

As Wrench describes, this is also the case in Norway. The government strategy as outlined in the Plan of Action against racism, the new integration law for newly arrived immigrants and refugees and Aetat’s Plan of Action against long-term unemployment all have similar strategies.

As shown in this study, both the interest for and the participation in what the authorities offer are very high if the offer is adapted to the individual’s situation and needs.

Many (24)(32)(33) have argued that adequate communication has a direct positive impact on intercultural relations. In addition, adequate communication has also been used as a measure of intercultural competence (24).

In this study, co-workers with an immigrant background expressed a significantly higher need for further education (more than 88%) than their ethnic Norwegian colleagues (25%) in the first year’s survey.

Cross-cultural transition and adaptation are more effectively managed when refugees are equipped with language skills and financial resources. Language skills are important for a number of reasons. They facilitate communication with members of the host culture, assist in effective learning and create avenues for social interaction and social support.

5.1.2 Experienced reaction patterns of the majority population

Immigrants with low competence are channeled to low-status and low-paid jobs with a higher degree of uncertainty (34).

In this study we found that a high percentage of employees had an immigrant background. Despite their good formal education and good performance at work most of the immigrants had an uncertain work contract for the first years.

5.1.3 Culture training

The literature presents sufficient evidence (12)(24)(35)(37) that people who cross cultural borders would benefit from some kind of systematic preparation and training to assist them in coping with stress related to social contact with a new culture.

5.1.4 Diversity Training

The objective was not to assimilate minorities into the native organizational culture but to create a dominant heterogeneous culture. It was meant to be a strategy for breaking down barriers of the employment of minorities by producing a more diverse workforce. The aim was therefore to utilize resources from the existing organization and to emphasize the importance of valuing differences.

5.1.5 Organizational equal opportunity policies

The working situation and focus on the individuals' needs changed significantly during the 18 months of the project.

The reason for the shift in the responses from the two surveys is to be traced back to the study's focus on eliciting the employees' needs and to the different projects initiated covering the requirements and needs of the co-workers and the hospital.

The demand for (job-related) education in general and language training in particular was higher after launching general training courses in the areas of cleaning and afterwards offering a course for the Certificate of Completed Apprenticeship in Cleaning. For the non-ethnic Norwegians, the language course during working hours was highly appreciated. The need for such a course was apparent from the interviews. Most of the co-workers working in the hospital for less than 5 years, reported having two working obligations or a family obligation, which rendered participation in a language course after work impossible.

Diversity management, the employment of visible immigrants in leading positions, fluently in Norwegian and holding a Completed Apprenticeship in Cleaning were seen as the main motivating factors.

The focus on expanding formal knowledge was also seen as a motivating factor for the ethnic Norwegian working staff. Also in that group the demand for further education was seen as an asset.

Question 10 (“what could the hospital do to increase your welfare at work?”) showed the differences in needs among the work force. The Norwegian work force was focusing on reduced work, higher salary, increased leadership skills among their superiors and organized social interaction, while different factors were affecting the welfare of co-workers with an immigrant background at work. The difference in needs was caused by many factors, not only by the difference in backgrounds. The different groups had different framework conditions to cope with at their work site. It also showed that the lack of positive feedback has a negative impact on motivation. An overview of those differences in conditions can be found in 4.3.

5.2 How these results may be used

In summation, I would like to indicate how the focus and results of this study could be used in the future. In this study I focused on the everyday situation experienced by the visible immigrants working in blue-collar work in Norway. Regarding their formal and informal resources are very seldom acknowledged by their employers and in the population in general. There is a wide range of informal resources among the non-ethnic Norwegian community, and three of them were most visible in this study. The first informal resource may be found in “survivor” characteristics, especially among those that have encountered obstacles in the process of leaving their home country. The second informal resource is their high motivation and dedication to their work. The third informal resource in our case resides in the fact that most of them have a different religion and different holiday schedules, which allows for an individualized working schedule that covers the needs of the hospital.

Looking at the working conditions for foreigners in general both in the private and public working places could help to raise their general welfare. This focus alone would be a step in the right direction. A follow up on HES issues is a very important factor for both the individual itself and for the economic results of the employer. Studies looking in this direction will give both the public and the legal immigrant an opportunity to understand and benefit from each other.

There has been registered a shift in the Norwegian blue-color work and workforce. The shift has been gradual over the last 10-20 years. In the case of the field of cleaning and sanitation countrywide and on-site at the National Hospital of Norway, the workforce has gone from middle-aged relatively uneducated former housewives to young, energetic more educated visible immigrants.

Acceptance of this kind of working immigration has been a difficult adaptation process for the majority population.

In general, this branch has a number of characteristics: many applicants, a high turnover, low status and little or no interest in offering further and higher training to individual workers.

Personnel investment strategies, government visions or company strategies are experienced to be applied only on a management level and not in the case of blue color work.

Problems immigrants meet in their working lives are caused partly by a lack of knowledge of the Norwegian language, a lack of recognized formal competence and discrimination. This is most visible because the co-workers that are in leading positions request cleaners that are Norwegian.

The study has tried to estimate the potential of integration by work experience in combination with an adapted training program. It can be noted that this study presents very similar results with those of R. Næss' study (37).

There is a full acceptance and appreciation of receiving "cleaning work" in the first years of the integration process. In addition, this branch is used to a high turnover. The immigrant themselves would like to go further or return to a previous performed profession.

If the government or the state authorities would like to utilize this potential, combined work training and language training would be an optimal solution for both (the individual and the state). Immigrating to a new country is a difficult process. Mental health issues are often discussed (24)(36)(23). This introduction to Norway could minimize the experienced culture shock and maximize the individual's potential in the new country.

5.3 Concluding comments and suggestions

One of the best alternatives to start the integration process would be to work in regular jobs in combination with adapted training programs where the individual can build up his or her own self-esteem, become reality oriented, develop new hopes for his or her future in the new country and gain an understanding of the new culture.

Adapted training programs, which combine practical and theoretical issues with the possibility of individual counseling hours, would help in easier adaptation of the experienced changes.

Profession training and motivation experienced (possibility to advancement) in the work environment would lead to better quality and HES environments. This effect would be enforced if it was followed by a D&D training and anchored in the companies guidelines.

The quality of the work performed and the individual's feeling of responsibility towards his or her job will be increased if the management would set the focus on:

1. Providing direct foremen with more training in managing a multicultural staff.
2. Providing immigrants and their leadership with training in efficient communication strategies.
3. Providing immigrants with information about the work market and their legal situation (rights and duties).
4. Providing immigrants with realizable offers to learn work-related Norwegian and assistance to fulfill an apprenticeship.

5. Encouraging the Union Leaders, representatives of HES and the management to focus on discrimination and have directives that outline how to deal with it.
6. Direct leadership (foremen) can and will see the connections to the potentials, needs and desires.

Where Diversity Management has been implemented successfully, it has proven to be a contributing factor to all the points above (1. to 6.), decreasing sick leave and to better communication and increased worker responsibility.

6. List of references

- (30) Agyris CR, Putnam R, Smith MC. Action Science: Concepts, Methods and Skills for Research and Intervention. San Francisco: Jossey Bass; 1985. p. 135.
- (32) Altrichter H. Action research for change and development: Do we need an alternative methodology for doing alternative research? Ortrum Zuber-Skerritt, ed. Brisbane: Center for the Advancement of learning and teaching, Griffith University; 1990.
- (13) Berg AM. Vellykket forvaltning – god organisation og ledelse i staten. Tano; 1995.
- (31) Berg B. Mangfold - Om rekruttering og integrering av innvandre i statlige virksomheter. Rapportnr. ST38 A00505/SINTEF; 2000.
- (33) Berg B. Bakerst i køen - Om flykningers deltakelse på arbeidsmarkedet. Rap. Nr. STF82 91007/SINTEF; Trondheim; 1992.
- (12) Berg B, Verdi C. Kvalifisering for norsk arbeidsliv. Eksempler for kvalifiseringstiltak for flyktninger og innvandrere. SINTEF, 2.edition; 1995.
- (5) Bjertnes M. Innvandring og innvandrere 2000. SA 33, Statistics Norway; 2000.
- (15) Burns T, Stalker SM. The Management of Innovations. London, Tavistock; 1966.
- (28) Cornford T, Smithson S. Project Research in Information Systems – a Student's Guide. Macmillan, Information Systems Series; 1996.
- (21) DeVoe DM. Framing Refugees as Clients. International Migration Review XV; 1981.
- (26) Eldering L, Knorth EJ. Marginalization of immigrant youth and risk factors in their everyday lives. Child and Youth Care Forum; 1998.
- (17) Erin K, Dobbin F. How Affirmative Action Became Diversity Management: Employer Response to Anti-discrimination Law 1961-1996. American Behavioral Scientist 41 (7): 960-984; 1998.
- (23) Garza Guerro. Culture Shock - Its mourning of identity and vicissitudes - Journal of the American Psychoanalytic Association 22; 1974.
- (25) Hauff E, Vaglum P. Integration of Vietnamese Refugees into the Norwegian Labour Market: The Impact of War Trauma, Cambridge University Press 1992: 151-181.
- (16) Herzberg F, Mauser B, Snyderman B. The motivation to work. New Brunswick, N.J. Transaction Publisher, Orig. 1959/ new edit; 1993.
- Holter M, Landsverk C. Issued by the Directorate of Immigration, SOPEMI, Trends of migration to and from Norway and the situation of immigrants in Norway, Final report, Oslo; 2001.

- (35) Hovland G. Integrasjon av unge innvandrere og flyktninger i relasjon til arbeidsmarkedet (dissertation). Faculty of Social Sciences, University of Oslo; 1997.
- (19) Kunz EF. The refugee in flight. Kinetic models and forms of displacement. *International Migration Review* 7 (summer): 125-140; 1973.
- (27) Kvale S. An introduction to Qualitative Research Interviewing. Gyldendal Norsk Forlag, 4th edition; 2001.
- (3) Lie, B. Immigration and immigrants 2002. Oslo, Statistics Norway; 2003.
- (30) Masters J. The History of Action Research. Hudhes (ed.) Action Research Electronic Reader. The University of Sidney; 1995.
[Http://www.behs.ccs.usyd.edu.au/arow/reader/rmasters.htm](http://www.behs.ccs.usyd.edu.au/arow/reader/rmasters.htm)
- (14) MacIntyre A. After Virtue: A Study in Moral Theory. London; 1981.
- (9) National Plan of Action to Combat Racism and Discrimination 2002-2006, Ministry of Local Government and Regional Development, PDC Tangen; 2002.
- (1) NOU. Report to the Storting no.17, Asylum- and Refugee Policies in Norway; 2000-2001.
<http://odin.dep.no/krd/engelsk/publ/rapporter/016081-040002/index-dok000-b-n-a.html>
- (4) NOU. Stortingsmelding nr. 17, Om innvandrings og det flerkulturelle Norge (1996-1997) Kommunal og arbeidsdepartement, Statens forvaltningstjeneste, Odin redaksjon.
- (2) NOU. Sortingsreport nr. 32, Rett på sak; 2001.
<http://odin.dep.no/jd/norsk/publ/utredninger/NOU/012001-020015/index-dok000-b-n-a.html>
- (37) Næss R. Innvandrere i renholdsarbeid. Sluttrapport, utvidet versjon; 2000.
- (29) Oja S, Smulyan L. Collaborative Action Research - A Developmental Approach, Falmer Press, N.Y.; 1989 page 12.
- (8) Rikshospitalet, Ledelsesprinsipper ved Rikshospitalet. H. Arnesen as., Oslo; 2000.
- (20) Rogg E. The Assimilation of Cuban Exiles. New York, Aberdeen; 1974.
- (38) Rogstad J. Innvandre med lav kompetanse- Hvem er de og hvilke problemer har de? Institutt for samfunnsforskning. University of Oslo; 1995.
- (7) Statistics Norway. The demographic characteristics of immigrant population in Norway, 2002/22:14-52.
- (22) Taylor R, Nathan D. Resettlement Casework: The Role of the Professional Annual Meeting of the Conference of Jewish Communal Service. Denver; 1980.
- (6) UDI (report from the Norwegian Directorate of Immigration). The Nature and Scope of Racism and Discrimination in Norway 1999-2000. 35; 2000.

(36) Veer G van der. Beyond Trauma: Cultural and Social Dynamics - Psychotherapeutic Work with Refugees In : Kleber RJ, Figley CR, Gersons B PR editors. New York, Plenum Press, 9: 33-52; 1995.

(24) Ward C, Bocher S, Furnham A. The Psychology of Culture Shock. Routledge, East Sussex; 2001.

(18) Watzlawick P, Weakland J, Fisch R. Change – Principles of Problem Formation and Problem Resolution. New York, W.W. Norton & Company; 1974.

(11) Wrench J. Diversity management in the European context: a critical examination of organizational strategies for combating ethnic discrimination and conclusion. Danish Center for Migration and Ethnic Studies, 2001. Published: Congress on Int. Perspectives on Cross-Cultural Workforce Diversity, Italy; 2001.

(10) Østby L. Beskrivelse av nyankomne flyktningers vei inn i det norske samfunnet SSB 23; 2001.

(32) Aakervik R. Fremmed på jobben? Innvandrene og arbeidslivet. Oslo: Tiden Norsk forlag; 1992.

Appendices

A Approval from the hospital authorities

B Survey questions

C Information example from Riksnytt

D NOU rapport

E Statistics of sick leave during the project

F Newspaper clippings from Norwegian newspapers